

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2008	2009	2010	2011	2012
Capital Expenditures	0				
Operating Costs	\$20,000				
External Revenues	(\$20,000)				
Program Income (County)					
In-Kind Match (County)	0				
 Net Fiscal Impact	 0				
 # Additional FTE Positions (Cumulative)	 0				

Is Item Included in Current Budget: YES _____ NO X

Budget Account No.: Fund 1152 Agency 160 Org 2137 Object 3429

Reporting Category _____

B. Recommended Sources of Funds / Summary of Fiscal Impact:

The Florida Department of Law Enforcement has awarded these grant funds to assist with overtime costs associated with the Sur 13 Investigation. There is no match requirement associated with this award. No additional positions are created, and no additional County funds are required.

Sur 13 Investigation	<u>\$20,000</u>
Total	<u>\$20,000</u>

III REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Administration Comments:

Atwillhitz 8-7-08
OFMB 8/7/08 cm 8/6/08

Am. J. Jacoby 8/8/08
Contract Administration 8/8/08

B. Legal Sufficiency:

[Signature] 8/11/08
Assistant County Attorney

C. Other Department Review:

Department Director

This summary is not to be used as a basis for payment.

BOARD OF COUNTY COMMISSIONERS
 PALM BEACH COUNTY, FLORIDA
 BUDGET AMENDMENT

FUND 1152 - Sheriff's Grants Fund

Use this form to provide budget for items not anticipated in the budget.

ACCT.NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	CURRENT BUDGET	INCREASE	DECREASE	ADJUSTED BUDGET	EXPENDED/ ENCUMBERED	REMAINING BALANCE
Revenues								
Violent Crimes Drug Control - Sur 13								
160-2137-3429	State Grant - Other Public Safety	0	0	20,000		20,000		
TOTAL REVENUES		0	\$6,093,644	\$20,000	\$0	\$6,113,644		
Expenditures								
Violent Crimes Drug Control - Sur 13								
160-2137-9498	Transfer to Sheriff's Grant Fund	0	0	20,000		20,000		
TOTAL EXPENDITURES		0	\$6,093,644	\$20,000	\$0	\$6,113,644		

Palm Beach County Sheriff's Office

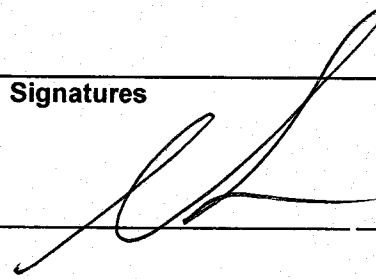
INITIATING DEPARTMENT/DIVISION

Administration/Budget Department Approval

OFMB Department - Posted

Signatures

Date

 7/31/08

By Board of County Commissioners
 At Meeting of August 18, 2008

Deputy Clerk to the
 Board of County Commissioners



Florida Department of
Law Enforcement

Gerald M. Bailey
Commissioner

Criminal Investigations
and Forensic Science Program
Post Office Box 1489
Tallahassee, Florida 32302-1489
(850) 410-8300
www.fdle.state.fl.us

Charlie Crist, *Governor*
Bill McCollum, *Attorney General*
Alex Sink, *Chief Financial Officer*
Charles H. Bronson, *Commissioner of Agriculture*

June 24, 2008

Honorable Ric L. Bradshaw
Sheriff
Palm Beach County Sheriff's Office
3228 Gun Club Road
West Palm Beach, Florida 33406
Attention: Chief Financial Officer Jim Davis

Dear Sheriff Bradshaw:

During the **June 2008** Violent Crime and Drug Control Council meeting, your agency was approved to receive a Violent Crime Award of **\$20,000** for the **Sur 13 Investigation**.

If you have any questions, please call Inspector Leisha Fordham at (850) 410-8619. Thank you for your support of the Florida Violent Crime and Drug Control Council.

Sincerely,

Rick Ward
Special Agent Supervisor
Office of Field Services

RW/jgh

Enclosures

Violent Crime Investigative Reimbursement Application

Rule Reference: 11N-1.004 and 11N-1.005, F.A.C.

Florida Department of Law Enforcement State Financial Assistance

Chapter 11N-1.004(3) requires in part "...Requesting agencies shall retain documentation supporting expenditures from the Account and make these available during the annual evaluation and audit of the trust fund."

The box below will be completed by FDLE:

The Florida Department of Law Enforcement (herein referred to as FDLE) may award state financial assistance in the amount of \$ 20,000 to the Palm Beach County Sheriff's Office (Requesting Agency, herein referred to as Recipient) on 6/5/2008 (Date) as follows:

To be completed by requesting agency:

- Violent Crime Investigations, Catalog of State Financial Assistance # 71.004, Appropriation Category # 109701, Violent Crime Investigative Emergencies
- Drug Control/Money Laundering Investigations -- Matching Funds, Catalog of State Financial Assistance # 71.005 Appropriation Category # 109701, Violent Crime Investigative Emergencies
- Victim or Witness Assistance, Catalog of State Financial Assistance # 71.006, Appropriation Category # 040000, Expenses

The administration of the resources awarded by the FDLE to the Recipient may be subject to audits and/or monitoring by the FDLE as described below:

MONITORING

In addition to reviews of audits conducted in accordance with Section 215.97, F.S., monitoring procedures may include, but not be limited to, on-site visits by the FDLE staff and/or other procedures. By accepting the award, the Recipient agrees to comply and cooperate with any monitoring procedures/processes deemed appropriate by the FDLE. In the event the FDLE determines that a limited scope audit of the Recipient is appropriate, the Recipient agrees to comply with any additional instructions provided by the FDLE staff to the Recipient regarding such audit. The Recipient further agrees to comply and cooperate with any inspections, reviews, investigations, or audits deemed necessary by Florida's Chief Financial Officer or Auditor General.

AUDIT

As a non-state entity defined by Section 215.97(2)(m), Florida Statutes, the Recipient may be subject to audit requirements as provided below:

In the event that the Recipient expends a total amount of all state financial assistance equal to or in excess of \$500,000 in any fiscal year of the Recipient, the Recipient must have a State single or project-specific audit for such fiscal year in accordance with Section 215.97, Florida Statutes, applicable rules of the Executive Office of the Governor and the Department of Financial Services, and Chapter 10.550 (local governmental entities), Rules of the Auditor General. In determining the state financial assistance expended in its fiscal year, the Recipient shall consider all sources of state financial assistance, including state financial assistance received from the FDLE, other state agencies, and other non-state entities. State financial assistance does not include Federal direct or pass-through awards and resources received by a non-state entity for Federal program matching requirements.

In connection with the audit requirements, the Recipient shall ensure that the audit complies with the requirements of Section 215.97(8), Florida Statutes. This includes submission of a financial reporting package as defined by Section 215.97(2)(e), Florida Statutes, and Chapter 10.550 (local governmental entities), Rules of the Auditor General.

If the Recipient expends less than \$500,000 in state financial assistance in its fiscal year, an audit conducted in accordance with the provisions of Section 215.97, Florida Statutes, is not required. In the event that the Recipient expends less than \$500,000 in state financial assistance in its fiscal year and elects to have an audit conducted in accordance with the provisions of Section 215.97, Florida Statutes, the cost of the audit must be paid from the non-state entity's resources (i.e., the cost of such an audit must be paid from the Recipient's resources obtained from other than State entities).

Information to help facilitate the Recipient's compliance with the requirements may be found at the following web sites:

- Auditor General - <http://www.state.fl.us/audgen/pages/localgovt.htm>
- Department of Financial Services (Chief Financial Officer) - <https://apps.fldfs.com/fsaaf/>

Violent Crime Investigative Reimbursement Application

Rule Reference 11N-1.004 and 11N-1.005, F.A.C.

NOTICE OF EXEMPTION FROM AUDIT

If the Recipient expends less than \$500,000 in all state financial assistance in its fiscal year and is exempt from the audit requirements, the Recipient's Chief Financial Officer or designee shall provide written notice of exemption to the FDLE. The notice of exemption from audit shall include the Recipient's fiscal year, name of the state financial assistance award from the FDLE, catalog of state financial assistance number, amount of the award, and statement that the Recipient is exempt from the audit requirements for its fiscal year due to the threshold requirements for an audit.

The notice of exemption from audit shall be submitted by March 1 following the end of the Recipient's fiscal year to the:

Florida Department of Law Enforcement
Investigations & Forensic Science
P. O. Box 1489
Tallahassee, Florida 32302

REPORT SUBMISSION

If a copy of the financial reporting packages required by this agreement is already submitted by or on behalf of the Recipient to FDLE because of federal single audit requirements, another audit reporting package does not need to be submitted.

Recipients, who do not already submit to FDLE a copy of the financial reporting packages required by this agreement, should send an audit report directly to each of the following:

Florida Department of Law Enforcement
Investigations & Forensic Sciences Program Office
P. O. Box 1489
Tallahassee, Florida 32302

Auditor General's Office
Room 401, Pepper Building
111 West Madison Street
Tallahassee, Florida 32399-1450

Any reports, management letter, or other information required to be submitted to the FDLE pursuant to this agreement shall be submitted timely in accordance with Florida Statutes, and Chapter 10.550, Rules of the Auditor General.

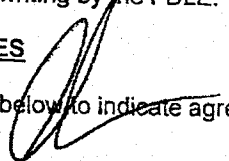
When submitting financial reporting packages to the FDLE for audits done in accordance with Chapter 10.550, Rules of the Auditor General, the Recipient should indicate the date that the reporting package was delivered to the Recipient in correspondence accompanying the reporting package.

RECORD RETENTION

The Recipient shall retain sufficient records demonstrating its compliance with the terms of this agreement for a period of five years from the date the audit report is issued, and shall allow the FDLE or its designee, Florida's Chief Financial Officer or Auditor General access to such records upon request. The Recipient shall ensure that audit working papers are made available to the FDLE or its designee, Florida's Chief Financial Officer or Auditor General upon request for a period of five years from the date the audit report is issued, unless extended in writing by the FDLE.

SIGNATURES

Please sign below to indicate agreement with the terms:



Signature of Agency Head

Ric L. Bradshaw, Sheriff

Print/Type Title & Name (Agency Head)

3/26/08
Date



Signature of Chief Financial Officer or Designee

George A. Forman, Chief Financial Officer

Print/Type Title & Name (Chief Financial Officer/Designee)

3/26/08
Date

Violent Crime Investigative Reimbursement Application

Rule Reference 11N-1.004 and 11N-1.005, F.A.C.

The information must be provided as completely as possible in able to assist the Violent Crime and Drug Control Council and its support staff in evaluating your request. Failure to provide the requested information may result in the consideration of your request being either delayed or denied.

Date: February 8, 2008

Agency Making Request: Palm Beach County Sheriff's office

Physical Address: 3228 Gun Club Road

West Palm Beach, FL 33406

Agency FEID#: 59-6000789

Agency Fiscal Year: 10/07 09/08
(Month/Year) (Month/Year)

Investigative Contact: Captain Jack Strenes Phone Number: (561) 688-4049

Email Address: StrenesJ@pbso.org

Is this case related to an active investigation? Yes No

If Yes, do you request the presentation be made before the Council in a closed session as authorized by F.S. 943.031(6)?
Yes No

- The following are requirements for submission of a request before the Council:
- ✓ The request must be submitted to the local Coordinating Team for review
 - ✓ The agency head of the requesting agency certifies the need for the requested funds
 - ✓ The trial occurred after July 1, 1994
 - ✓ The agency CFO certifies the expenditures made

This request is made for the reason: "complex/lengthy violent crime investigation"
 "significant emergency to the state"
 "county's extraordinary violent crime trial expenses"

GENERAL INFORMATION & REIMBURSEMENT FUNDING PROCEDURES

The maximum funding for all investigative efforts shall be \$100,000 for each criminal event. The maximum funding available to each county for all trials of the defendant derived from a criminal event shall be \$100,000. The maximum amount of funding available to a single agency is limited to \$200,000 during the agency's single fiscal year. If funds are received, but are not totally expended, they must be refunded to the Council. Details for all funding issues are found in Florida Administrative Code, Chapter 11N-1, "Violent Crime Investigative Emergency and Drug Control Strategy Implementation Account". It is suggested that this information be reviewed prior to submitting a request.

A complete, signed request packet, with attachments, should be forwarded to the Regional Coordinating Team for review. The Regional Coordinator will transmit the request to the Council's staff for review and inclusion on the agenda of an upcoming Council meeting. **NO funding request will be considered if the Regional Coordinator's certification has not been completed.** Once signed by the Coordinator, the forms are to be submitted to OSP no later than 30 days preceding the upcoming meeting.

Please attach an itemized listing of the requested expenses. Information to be included, at a minimum, is a listing of all salary overtime (including benefits), travel expenses, equipment leasing or rental and contractual expenses. It should be noted that purchases of equipment, normal supplies and/or payment of base salaries of permanent employees are specifically excluded from reimbursement consideration. Vague descriptions (e.g. "Miscellaneous investigative expenses") are not acceptable.

Violent Crime Investigative Emergency &
Reimbursement Funding Request

3 of 5

Form FDLE/OSI-001 Revised 12/03/04

FEACH # 1388

INSIDE # 04-255

SEE SUMMARY

IFS Case#: VC-07/08-2
Case Name: Sur 13

COPY

Violent Crime Investigative Reimbursement Application

Rule Reference 11N-1.004 and 11N-1.005, F.A.C.

REIMBURSEMENT FUNDING PROCEDURES (CONTINUED)

In addition to completing all of the information detailed below, please include a narrative description of the case/trial for which reimbursement is being requested. Information should be included in this narrative that details why the case/trial meets the criteria for reimbursement. Information should also be included as to other alternative methods sought to obtain the necessary funding as well as what will be the impact on the agency if the Council does not authorize the requested funds. If advance funding is being requested, please detail the need for this advanced funding and why it is not possible to seek after-the-fact reimbursement from the Council. **It is imperative that current financial information be provided on this form, preferably as current as the ending of the last month prior to the Council meeting reviewing the request.**

Pursuant to the criteria found in Rule 11N-1.0021(2), F.A.C., a maximum of \$25,000 is allowable for emergency funding requests. Is this a request for Emergency Funding? Yes No

Reimbursement Requested:

Category	Amount Requested	Agency Budget Allotted	Entity Budget Allotted
Overtime:	\$43,205.23	\$13,423,608	\$438,175.00
Case-Related Investigative Expenses	\$	\$	\$
Travel:	\$	\$	\$
County Trial Related Expenses:	\$	\$	\$
Anticipated Expenses (if applicable)	\$	\$	\$
Totals	\$43,205.23	\$13,423,608	\$438,175.00

Agency Remaining Budget (Current as of the following date: 02 / 08 / 08)

Category	Agency Budget Remaining (\$ and %)	Entity Budget Remaining (\$ and %)
Overtime:	\$10,664,024 % 74	\$ 271,938.61 %62
Case-Related Investigative Expenses	\$ %	\$ %
Travel:	\$ %	\$ %
County Trial Related Expenses:	\$ %	\$ %
Anticipated Expenses (if applicable)	\$ %	\$ %
Totals	\$10,664,024 %	\$271,938.61 %

Chief Financial Officer: Please state the Agency Ending Balance for the previous fiscal year (9/ 2007).
(year) / (year)

Check (✓) status as surplus or deficit: Surplus \$ _____ **OR** Deficit **-\$1,133,818**

(To be completed by Violent Crime and Drug Control Council Staff)

Total Amount Approved: \$ 20,000 ⁰⁰ by VCDCC on 6/5/2008
(date) *[Signature]*

Violent Crime Investigative Reimbursement Application

Rule Reference 11N-1.004 and 11N-1.005, F.A.C.

REQUESTING AGENCY CERTIFICATION

I certify that the reimbursements/expenses sought by this requesting agency/county currently and significantly limit the requesting agency's/county's ability to provide services or duties required by law. The representations made on this form and its attachments are true and correct to the best of my knowledge and belief. If funding is received, I agree on behalf of the agency/county to provide the original supporting documentation for this application upon request and to return unexpended funds pursuant to 11N-1.004(4), Florida Administrative Code.

Agency Head (Print Name): Ria L. Bradshaw

Signature: Colonel Michael S. Ganga
DIRECTOR LAW ENFORCEMENT

Date: 8 FEB 2008

I certify that the reimbursements/expenses sought by this requesting agency/county are true and correct to the best of my knowledge and belief. If funding is received, I agree on behalf of the agency/county to provide the original supporting documentation for this application upon request and to return unexpended funds pursuant to 11N-1.004(4), Florida Administrative Code.

Agency Chief Financial Officer (CFO) (Print Name): Jim Davis

Signature: [Signature]

Date: 2/8/08

I certify that this request has been reviewed by the Regional Coordinating Team and is being submitted with the Team's support.

Regional Coordinator (Print Name): FRANK LEDBEE / JOHN VECCHIO

Signature: [Signature]

Date: 2-8-08