

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	_____	_____	_____	_____	_____

ADDITIONAL FTE POSITIONS (Cumulative) _____

Is Item Included In Current Budget? Yes _____ No _____
 Budget Account No.: Fund _____ Department _____ Unit _____ Object _____

Reporting Category _____

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

There will be no additional impact other than the previously budgeted amount.

C. Departmental Fiscal Review: Paul J. Reynolds

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Dev. and Control Comments:

Atwillhite 8.18.08 J. Jacoby 8/21/08
 8/18/08 OFMB v o Contract Dev. and Control
 (JD) 8/19/08 8/15/08 8/24/08

B. Legal Sufficiency: **This amendment complies with our review requirements.**

Anne Delmont 8/21/08
 Assistant County Attorney

C. Other Department Review:

 Department Director

**FIRST AMENDMENT
TO THE AGREEMENT WITH HOUSING PARTNERSHIP, INC.
FOR FUNDING OF THE COMMUNITY COMP PROJECT**

THIS FIRST AMENDMENT, dated, _____ 2008, to the Agreement dated July 22, 2008, by and between Palm Beach County, a Political Subdivision of the State of Florida, by and through its Board of Commissioners, hereinafter referred to as the A**COUNTY**@, and Housing Partnership, Inc., a Florida not-for-profit corporation authorized to do business in the State of Florida, hereinafter referred to as "AWARDEE", and whose Federal Tax I.D. # is 59-2704597.

WITNESSETH:

WHEREAS, the parties have entered into that certain Agreement dated July 22, 2008 (R2008-1255), hereinafter referred to as the A**CONTRACT**@, under which the AWARDEE would receive a Resident's Education to Action Program "REAP" grant in an amount not-to-exceed \$2,200 for the purchasing of color printers, ink and supplies; and

WHEREAS, COUNTY and AWARDEE desire to amend the **CONTRACT** by changing the eligible project expenses from color printers, ink and supplies to desktop computers and supplies; and

WHEREAS, amending the project scope of work by changing the eligible project expenses reflects the requested items originally proposed by AWARDEE in it's REAP grant.

NOW THEREFORE, in consideration of the mutual covenants and agreements expressed herein, the COUNTY and the AWARDEE agree as follows:

1. The above recitals are true and correct and are incorporated herein by reference.
2. The third whereas clause to the **CONTRACT** is hereby deleted in its entirety and replaced by the following: "WHEREAS, during the six (6) week REAP, AWARDEE submitted a grant application for the America's Next Top Neighborhood Award Program, which consists of purchasing desktop computers and supplies to provide free computer classes, job training, and other educational training to the Belle Glade community, hereinafter referred to as the "Community Comp Project"; and"
3. A revised Exhibit "A-1", as attached hereto and incorporated herein by reference shall replace the original Exhibit "A" attached to the **CONTRACT**.
4. All other provisions of said **CONTRACT**, dated July 22, 2008, are hereby confirmed and, except as provided herein, are not otherwise altered or amended and shall remain in full force and effect.

5. This First Amendment shall not take effect until executed by the COUNTY and AWARDEE.

IN WITNESS WHEREOF, the undersigned parties have signed this First Amendment on the date first written above.

ATTEST:
SHARON R. BOCK,
CLERK & COMPTROLLER

PALM BEACH COUNTY, FLORIDA
BY ITS BOARD OF COUNTY
COMMISSIONERS

By: _____

Deputy Clerk

By: _____

Addie L. Greene, Chairperson

APPROVED AS TO FORM AND
LEGAL SUFFICIENCY

By: *Anne Delmont*
Assistant County Attorney

APPROVED AS TO TERMS AND
CONDITIONS

By: *Houston Tate*
Houston Tate, Director
Office of Community Revitalization

WITNESSES:

HOUSING PARTNERSHIP, INC.

Ann Thompson
Witness Signature
[Signature]
Witness Signature

By: *[Signature]*
Patrick McNamara, President & CEO
(Printed name)
Patrick McNamara
(Signature)



EXHIBIT "A-1"

**Palm Beach County
Office of Community Revitalization
Resident Education to Action Program (REAP)
"America's Next Top Neighborhood Award Program"**

SCOPE OF WORK

Applicant Name:

Housing Partnership, Inc.

Project Title:

Community Comp Project

Area Location:

The project will be located at the Pioneer Park Beacon Center, in the City of Belle Glade

Project Description:

The *Community Comp Project* is an educational project presented by the Pioneer Park Beacon Center. This project will provide free computer classes, job training, and other educational training to the community. This project will also improve the overall communal and educational development of the parents and students of the family resource center at Pioneer Park Beacon Center. The funding requested will be used to purchase desktop computers and supplies, which will allow Housing Partnership, Inc. to provide free computer classes, job training, and other educational training to the Belle Glade community.

- **County funds requested:** \$ 2,200.00
- **Total Applicant's contribution:** \$ 2,200.00
- **Total Project Cost:** \$ 4,400.00

AGREEMENT BETWEEN PALM BEACH COUNTY AND HOUSING PARTNERSHIP, INC. FOR FUNDING OF THE COMMUNITY COMP PROJECT

THIS AGREEMENT is made and entered into on JUL 22 2008, by and between Palm Beach County, a political subdivision of the State of Florida, hereinafter referred to as "County" and Housing Partnership, Inc. a Florida not-for-profit corporation authorized to do business in the State of Florida, hereinafter referred to as "AWARDEE", and whose Federal Tax I.D. # is 59-2704597.

WITNESSETH:

WHEREAS, AWARDEE, completed a six (6) week Resident's Education to Action Program (REAP) held by the County on January 24, 2008 to February 28, 2008; and

WHEREAS, the REAP provided organizational and technical support to residents and neighborhood organizations who desire to improve the quality of life within their community; and

WHEREAS, during the six (6) week REAP, AWARDEE submitted a grant application for the America's Next Top Neighborhood Award Program, which consists of purchasing color printers, ink and supplies to provide free computer classes, job training, and other educational training to the Belle Glade community, hereinafter referred to as the "Community Comp Project"; and

WHEREAS, County has selected AWARDEE's Community Comp Project to receive funding for implementation; and

WHEREAS, County desires to provide AWARDEE an amount not to exceed Two Thousand Two Hundred Dollars (\$2,200) to help offset expenses toward AWARDEE's implementation of its Community Comp Project; and

WHEREAS, implementation of AWARDEE's Community Comp Project serves a public purpose; and

WHEREAS, both parties desire to enter into this Agreement.

NOW THEREFORE, in consideration of the covenants and promises contained herein, the parties hereby agree to the following terms and conditions:

1. AWARDEE shall perform the Project Scope of Work, as proposed by AWARDEE and detailed in the Scope of Work as described in Exhibit A. AWARDEE shall abide by any written instructions or conditions placed on the Project by the County."

2. County agrees to fund an amount not to exceed Two Thousand Two Hundred

Dollars (\$2,200) to AWARDEE for reimbursement of costs related to the Community Comp Project as set forth more specifically in Exhibit "A", attached hereto and incorporated herein, hereinafter referred to as the "Project".

3. COUNTY agrees to pay on behalf of AWARDEE an amount not to exceed Two Thousand Two Hundred Dollars (\$2,200) for expenses incurred by AWARDEE in accordance with the Project Budget. AWARDEE hereby authorizes COUNTY to make reimbursement payments directly to Registered COUNTY Vendors on behalf of AWARDEE, for expenses incurred pursuant to this Agreement. COUNTY will use its best efforts to reimburse the AWARDEE and/or Registered COUNTY Vendors within forty-five (45) days of receipt of invoices indicating services or materials have been rendered in furtherance of the scope of work. These invoices must be approved in writing by the AWARDEE and/or registered COUNTY vendors indicating that the services or materials were delivered to AWARDEE's satisfaction. If payment is being made to an individual, the individual's social security number must be provided to COUNTY on a separate sheet of paper with the invoices. COUNTY may make payments directly to the vendor issuing the invoice, or may purchase items on behalf of AWARDEE from registered COUNTY vendors. In no event shall payments and/or reimbursements made by COUNTY exceed Two Thousand Two Hundred Dollars (\$2,200) for this Project. The COUNTY is exempt from payment of Florida State Sales and Use Taxes. The COUNTY will not reimburse AWARDEE for payment of any sales tax. AWARDEE is not authorized to use the COUNTY's tax Exemption Number in securing such materials.

4. County will use its best efforts to provide said funds to AWARDEE on a reimbursement basis within forty-five (45) days of receipt of the following information:

- a. A written statement that the Project, as specified herein, was carried out in accordance with this Agreement; and
- b. A Contract Payment Request Form attached hereto and made a part hereof as Exhibit "B", which is required for each and every reimbursement requested by AWARDEE. Said information shall list each invoice paid by AWARDEE and shall include the vendor invoice number; invoice date; and the amount paid by AWARDEE along with the number and date of the respective check and/or proof of payment for said payment. AWARDEE shall attach a copy of each vendor invoice paid by AWARDEE along with a copy of the respective check and/or proof of payment, and shall make reference thereof to the applicable item listed on the Contract Payment Request Form.

5. AWARDEE agrees, warrants, and represents that all of the employees and participants in the Project will be treated equally during employment, and for the provision of services without regard to residency, race, color, religion, disability, sex, age, national origin, ancestry, marital status, or sexual orientation.

6. AWARDEE warrants it is an active not-for-profit corporation, duly chartered and registered with the Florida Department of State, Division of Corporation.

7. . AWARDEE shall be responsible for the operation and maintenance of the Project, including all associated costs.

8. The term of this Agreement shall be for eight (8) months, commencing upon the date of execution by the parties hereto.

9. The parties agree that in the event AWARDEE is in default of its obligations under this Agreement, the County shall provide AWARDEE thirty (30) days written notice to cure the default. In the event AWARDEE fails to cure the default within the thirty (30) day cure period, the County shall have no further obligation to honor reimbursement requests submitted by AWARDEE for the Project deemed to be in default and AWARDEE shall return any County funds already collected by AWARDEE under this Agreement for the Project.

10. Notwithstanding any provision of this Agreement to the contrary, this Agreement may be terminated by the County, without cause, upon thirty (30) days prior written notice to the other party. The County may terminate this Agreement with cause, upon expiration of the thirty (30) day cure period provided for in Section 8 above.

11. AWARDEE shall complete the Project within six (6) months of execution of this Agreement, and shall provide its final reimbursement request(s) and final accounting data to County for the completed project on or before seven (7) months of execution of this Agreement by the parties hereto.

12. In the event AWARDEE ceases to exist, or ceases or suspends the Project for any reason, any remaining unpaid portion of this Agreement shall be retained by County, and County shall have no further obligation to honor reimbursement requests submitted by AWARDEE. County shall make the determination that AWARDEE has ceased or suspended the Project and AWARDEE agrees to be bound by County's determination.

13. COUNTY shall have the right to perform on-site inspections during normal business hours to verify the Project is being executed in conformance with the Project Scope of Work.

14. AWARDEE agrees to abide by, and be governed by, all applicable federal, state, county, and municipal laws, including but not limited to, Palm Beach County's ordinances, as said laws and ordinances exist and are amended from time to time. In entering into this Agreement, Palm Beach County does not waive the requirements of any County or local ordinance or the requirements of obtaining any permits or licenses normally required to conduct business or activity conducted by AWARDEE. Failure to comply may result in County's refusal to honor reimbursement requests for the Project.

15. County reserves the right to withhold reimbursement if the Project is not completed as specified in Exhibit "A".

16. It is understood and agreed that AWARDEE is merely a recipient of County funding and is an independent contractor and is not an agent, servant or employee of County or its Board of County Commissioners. It is further acknowledged that the County only contributes funding under this Agreement and operates no control over the Project. In the event a claim or lawsuit is brought against County or any of its officers, agents or employees, AWARDEE shall indemnify, save and hold harmless and defend the County, its officers, agents, and/or employees from and against any and all claims, liabilities, losses, judgments, and/or causes of action of any type arising out of or relating to any act or omission of AWARDEE, its agents, servants and/or employees in the performance of this Agreement. The forgoing indemnification shall survive termination of this Agreement.

17. AWARDEE shall, at its own expense, maintain in effect at all times during the life of this Agreement, Commercial General Liability at a limit of liability not less than \$500,000 per occurrence and shall not include an endorsement excluding Contractual Liability nor Cross Liability unless granted in writing by County's Risk Management Department. AWARDEE agrees to endorse COUNTY as an Additional Insured with a CG026 Additional Insured Designated Person or Organization endorsement to Commercial General Liability. The additional insured shall read "Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees and Agents. Coverage shall be provided on a primary basis.

18. AWARDEE shall deliver to the COUNTY a Certificate of Insurance evidencing the required coverage, and providing minimum ten (10) day endeavor to notify due to cancellation or non-renewal of coverage.

19. AWARDEE agrees that any volunteer who performs services connected with the Project will fully execute a Release and Hold Harmless Agreement, which is attached hereto and incorporated herein as Exhibit "C", before engaging in any such service. AWARDEE will keep on file a fully executed Release and Hold Harmless Agreement for each volunteer for a period of five (5) years from the effective date of this Agreement.

20. AWARDEE shall maintain books, records, documents and other evidence that sufficiently and properly reflect all costs of any nature expended in the performance of this Agreement for a period of not less than three (3) years. Upon advance notice to AWARDEE, County shall have the right to inspect and audit said books, records, documents and other evidence during normal business hours.

21. The County and AWARDEE may pursue any and all actions available under law to enforce this Agreement including, but not limited to, actions arising from the breach of any provision set forth herein.

22. This Agreement shall be governed by the laws of the State of Florida and any and all legal action necessary to enforce this Agreement shall be held in Palm Beach County.

23. As provided in Section 287.132-133, Florida Statutes, by entering into this Agreement or performing any work in furtherance hereof, AWARDDEE certifies that it, its affiliates, suppliers, subcontractors and consultants who will perform hereunder, have not been placed on the convicted vendor list maintained by the State of Florida Department of Management Services within thirty six (36) months immediately preceding the date hereof. This notice is required by Section 287.133(3)(a), Florida Statutes.

24. This Agreement represents the entire agreement between the parties and supersedes all other negotiations, representations, or agreement, either written or oral, relating to this Agreement. This Agreement may be modified and amended only by written instrument executed by the parties hereto.

25. Any notice given pursuant to the terms of this Agreement shall be in writing and hand delivered or sent by U.S. mail. All notices shall be addressed to the following:

As to the County:

Palm Beach County Office of Community Revitalization
Houston L. Tate, OCR Manager
2300 North Jog Road
West Palm Beach, Florida 33406

As to AWARDDEE:

Housing Partnership, Inc.
Patrick McNamara, President & CEO
2001 W. Blue Heron Blvd.
West Palm Beach, FL 33404

26. This Agreement is made solely and specifically among and for the benefit of the parties hereto, and no other person shall have any rights, interest, or claims hereunder or be entitled to any benefits under or on account of this Agreement as a third-party beneficiary or otherwise.

(The remainder of this page is intentionally left blank)

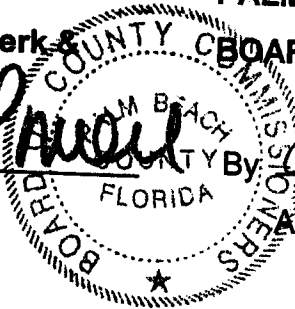
IN WITNESS WHEREOF, the undersigned parties have signed this Agreement on the date first above written.

R2008 1255 JUL 22 2008
PALM BEACH COUNTY, FLORIDA, BY ITS

ATTEST:

SHARON R. BOCK, Clerk & Comptroller

By: [Signature]
Deputy Clerk



BOARD OF COUNTY COMMISSIONERS

By: [Signature]
Addie L. Greene, Chairperson

WITNESSES:

[Signature]
Witness Signature

[Signature]
Witness Signature

HOUSING PARTNERSHIP, INC.

By: [Signature]
Patrick McNamara, President & CEO
(Printed name)

[Signature]
Patrick McNamara, President & CEO
(Signature)

APPROVED AS TO FORM AND LEGAL SUFFICIENCY

By: [Signature]
County Attorney

APPROVED AS TO TERMS AND CONDITIONS

By: [Signature]
Houston L. Tate, Manager
Office of Community Revitalization

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EXHIBIT "A"

Palm Beach County
Office of Community Revitalization
Resident Education to Action Program (REAP)
"America's Next Top Neighborhood Award Program"

SCOPE OF WORK

Applicant Name:
Housing Partnership, Inc.

Project Title:
Community Comp Project

Area Location:
The project will be located at the Pioneer Park Beacon Center, in the City of Belle Glade

Project Description:
The *Community Comp Project* is an educational project presented by the Pioneer Park Beacon Center. This project will provide free computer classes, job training, and other educational training to the community. This project will also improve the overall communal and educational development of the parents and students of the family resource center at Pioneer Park Beacon Center. The funding requested will be used to purchase color printers, ink and supplies, which will allow Housing Partnership, Inc. to provide free computer classes, job training, and other educational training to the Belle Glade community.

- **County funds requested:** \$ 2,200.00
- **Total Applicant's contribution:** \$ 2,200.00
- **Total Project Cost:** \$ 4,400.00



Exhibit B

**PALM BEACH COUNTY
OFFICE OF COMMUNITY REVITALIZATION
RESIDENT EDUCATION TO ACTION PROGRAM (REAP)
REQUEST FOR PAYMENT FORM**

Date _____
Project Name _____
Project Coordinator _____
Address _____
Reason for request _____
Amount being requested \$ _____

Recipient of disbursed funds:

Name _____
Address _____
Telephone # _____

Attach **original** receipt(s) and/or invoice(s)

Deliver / Mail to:

LaToya Ricketts
Palm Beach County Administration
Office of Community Revitalization
2300 North Jog Road
West Palm Beach, FL 33411

For financial information regarding your Resident Education to Action Program (REAP) Grant project, please call Vicki White at 233-5026.

RELEASE AND HOLD HARMLESS AGREEMENT

This Release and Hold Harmless Agreement ("Agreement") is made this _____ day of _____, _____, by _____ ("Volunteer") for the benefit of Palm Beach County, Florida, ("County").

WHEREAS, County has awarded a Residents Education To Action Program (REAP) Grant ("Grant") to allow the Community Comp Project presented by Housing Partnership, Inc. to improve the neighborhood, which requires Volunteer assistance.

NOW, THEREFORE, in order to fulfill the obligations under this Grant, the Volunteer agrees as follows:

1. Volunteer does hereby waive, release, relinquish, satisfy, quit claim and forever discharge the County, or any of its officers, agents, and/or employees from and against any and all actions, claims liabilities, losses, and demands that he/she ever had, now has, or may have against the County, or any of its officers, agents, and/or employees as a result of or in connection with satisfying the obligations of the Grant.

2. Volunteer shall protect, defend, reimburse, indemnify and hold County, its agents, officers and/or employees harmless from and against all claims, liability, expense, loss, cost, damages or causes of action of every kind or character, including, but not limited to, attorney's fees and costs, whether at trial or appellate levels or otherwise, arising during and as a result of his/her performance of the terms of this Grant or due to the acts or omissions of the Volunteer.

I have read this Agreement fully and understand its content and sign it of my own free will. I further certify that I am eighteen (18) years of age or older or the parent/legal guardian of a minor participant.

Name: _____

Date: _____

Signature: _____

If under age 18:

Name of parent/legal guardian: _____ Date: _____

Signature of parent/legal guardian: _____

RECEIVED
6/2/08

**Resident Education to Action Program (REAP)
"America's Next Top Neighborhood Award Project"**

**RISK MANAGEMENT
INSURANCE VERIFICATION FORM**

Please review the attached Applications (s) and indicate if the project requires General Liability insurance and provide any additional comments as applicable.

APPLICANT: Housing Partnership, Inc.- Pioneer Park Beacon Center

PROJECT DESCRIPTION:

The "Community Comp Project" is a community unification project presented by Housing Partnership, Inc.- Pioneer Park Beacon Center to acquire purchasing Color Printers, Ink and supplies to provide free Computer Classes, Job Training, and other Educational Training to the community. This project will also improve the overall communal and educational development of the Parents and students of the Family Resource Center at Pioneer Park Beacon Center.

County funds requested: \$ 2,200.00


Total Project Cost: \$ 4,400.00

APPROVAL STATUS:

Risk Management ~~agree~~ **do not agree** to waive the "insurance requirement" for the Housing Partnership, Inc. a Florida not-for-profit corporation.

INSURANCE NEEDED: YES NO

COMMENTS: _____


SIGNATURE OF REVIEWER

PALM BEACH COUNTY
RISK MANAGEMENT DEPARTMENT
CASUALTY INSURANCE DIVISION
160 AUSTRALIAN AVE SUITE 401
WEST PALM BEACH, FL 33403

TITLE OF REVIEWER

PRINT NAME

5/29/08
DATE

ACORD CERTIFICATE OF LIABILITY INSURANCE

HOUSING PART 01 OTOS
 6/12/2008

PRODUCER
 Wells Fargo Insurance Services Southeast, Inc.
 2054 Vista Parkway, Suite 400
 West Palm Beach, FL 33411-2718
 (561) 655-5500

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED
 Housing Partnership Inc's Pahokee Beacon Center
 2001 W Blue Heron Blvd
 Riviera Beach, FL 33404

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Western World Insurance Company	
INSURER B: Old Dominion Insurance Company	
INSURER C: Majestic Insurance Company	
INSURER D:	
INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSTR. ADD'L LTR. REISSD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	NPP1136895	11/16/2007	11/16/2008	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS GARAGE LIABILITY <input type="checkbox"/> ANY AUTO EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$	B1G33239	10/1/2007	10/1/2008	COMBINED SINGLE LIMIT (Ea accident) \$ 500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC AGG \$ EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/ MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	C20080619901	6/10/2008	6/10/2009	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Note: Palm Beach County Board of County Commissioners is included as an Additional Insured ATIMA.

CERTIFICATE HOLDER
 Palm Beach County Board of County Commissioners
 c/o OCR Manager
 OCR2300 N. Jog Road
 West Palm Beach, FL 33411-

CANCELLATION
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
 AUTHORIZED REPRESENTATIVE

ACORD 25 (2001/08)

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STATE OF FLORIDA, COUNTY OF PALM BEACH
 I, SHARON R. BOCK, Clerk & Controller certify this to be a true and correct copy of the original filed in my office on JUL 22 2008
 dated at West Palm Beach, FL on JUL 22 2008
 By: [Signature]
 Deputy Clerk

