

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: (X) Consent () Regular
February 3, 2009 () Ordinance () Public Hearing

Department:

Submitted By: Clerk & Comptroller

Submitted For: SUPERVISOR OF ELECTIONS

I. EXECUTIVE BRIEF

A. Motion and Title:

STAFF RECOMMENDS MOTION TO APPROVE the Bond of newly elected Supervisor of Election SUSAN BUCHER.

B. Summary:

Following the election, newly elected or re-elected officials must secure bonding for presentation to the Board of County Commissioners for approval pursuant to Ordinance No. 98-51.

Payment for the costs of bond premiums is paid out of the County's General Revenue Fund pursuant to Chapter 113.07(4), F.S.

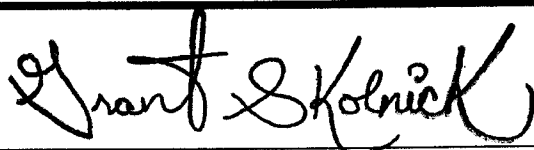
C. Background and Justification:

On November 4, 2008, the above referenced constitutional officers were duly re-elected for a four year term beginning January 1, 2009.

D. Attachments: Bond document for:

Susan Bucher, Supervisor of Election

Recommended By:



Grant J. Skolnick, Esq. Administrator,
Board Services

1/20/09

Date

Approved by: _____

Assistant County Administrator

Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	_____	_____	_____	_____	_____
# ADDITIONAL FTE POSITIONS (Cumulative)	_____	_____	_____	_____	_____

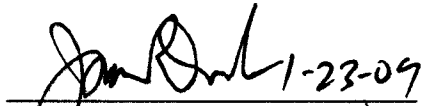
Is Item Included In Current Budget? Yes _____ No _____
 Budget Account No.: Fund _____ Dept _____ Unit _____
 Object _____ Program _____

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


C. Departmental Fiscal Review:

III. REVIEW COMMENTS

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



 OFMB/Budget
 1-23-09



 Contract Development and Control
 1/23/09

B. Legal Sufficiency:



 Assistant County Attorney
 1/26/09

C. Other Department Review:

 Department Director

State of Florida

Secretary of State

Division of Elections

500 South Bronough Street, Room 316

Tallahassee, Florida 32399-0250

Public Official Bond

County of Palm Beach

Bond No. 3-708-285

KNOW ALL MEN BY THESE PRESENTS, That we, Susan Bucher
(Official's Name)
as Principal, and The Ohio Casualty Insurance Company

as Surety, are bound unto the Governor of the State of Florida, and his successors in office, in the sum of
\$ 5,000.00 Dollars, we hereby bind ourselves and each of our heirs, executors, administrators,
successors and assigns, jointly and severally.

THE CONDITION OF THIS OBLIGATION IS SUCH, That, whereas, said official was
 elected appointed Palm Beach County Supervisor of Elections to hold this office
(Name of Office)
for a term beginning 1/6/09 and ending 1/6/13 and until his/her
successor is qualified according to the Constitution and Laws of the State of Florida.

NOW, THEREFORE, If the official shall faithfully perform the duties of his/her office as provided by law, this
obligation is void.

X Susan Bucher
(Signature of Official)

Signed and Sealed this 6th day of JANUARY, 2009.

136 North Third Street Hamilton, Ohio 45026
(Address of Main Surety Company)
The Ohio Casualty Insurance Company
(Name of Local Bonding Company)

500 Winderley Pl., Ste. 200, Maitland, FL. 32751
(Address of Local Bonding Company)

(SEAL)

By X Michael Boller
(Signature of Licensed Resident Agent)

A026595
(Social Security Number of Licensed Resident Agent)

Michael Boller
(Type Name of Licensed Resident Agent)

The above is approved this 6th day of JANUARY, 2009.

Signature: _____

Approved by: _____

1bond.doc (2/04)

CERTIFIED COPY OF POWER OF ATTORNEY
THE OHIO CASUALTY INSURANCE COMPANY
WEST AMERICAN INSURANCE COMPANY

No. 38-240

Know All Men by These Presents: That THE OHIO CASUALTY INSURANCE COMPANY, an Ohio Corporation, and WEST AMERICAN INSURANCE COMPANY, an Indiana Corporation, pursuant to the authority granted by Article III, Section 9 of the Code of Regulations and By-Laws of The Ohio Casualty Insurance Company and West American Insurance Company, do hereby nominate, constitute and appoint **Thomas E. Lynch, Michael Bottcher, David S. Stone, Steven R. Sauer, Charles E. Knudsen, Phillip A. Roberts or Jean Reed Parks of Delray Beach, Florida** its true and lawful agent (s) and attorney (s)-in-fact, to make, execute, seal and deliver for and on its behalf as surety, and as its act and deed any and all BONDS, UNDERTAKINGS, and RECOGNIZANCES, not exceeding in any single instance **TWO MILLION (\$2,000,000.00) DOLLARS**, excluding, however, any bond(s) or undertaking(s) guaranteeing the payment of notes and interest thereon

And the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Companies, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the Companies at their administrative offices in Fairfield, Ohio, in their own proper persons. The authority granted hereunder supersedes any previous authority heretofore granted the above named attorney(s)-in-fact.

In WITNESS WHEREOF, the undersigned officer of the said The Ohio Casualty Insurance Company and West American Insurance Company has hereunto subscribed his name and affixed the Corporate Seal of each Company this **23rd day of March, 2005**.



Sam Lawrence
Sam Lawrence, Assistant Secretary

STATE OF OHIO,
COUNTY OF BUTLER

On this **23rd day of March, 2005** before the subscriber, a Notary Public of the State of Ohio, in and for the County of Butler, duly commissioned and qualified, came Sam Lawrence, Assistant Secretary of THE OHIO CASUALTY INSURANCE COMPANY and WEST AMERICAN INSURANCE COMPANY, to me personally known to be the individual and officer described in, and who executed the preceding instrument, and he acknowledged the execution of the same, and being by me duly sworn deposes and says, that he is the officer of the Companies aforesaid, and that the seals affixed to the preceding instrument are the Corporate Seals of said Companies, and the said Corporate Seals and his signature as officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporations.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at the City of Hamilton, State of Ohio, the day and year first above written.



Cheryl S. Gregory
Notary Public in and for County of Butler, State of Ohio
My Commission expires August 6, 2007.

This power of attorney is granted under and by authority of Article III, Section 9 of the Code of Regulations and By-Laws of The Ohio Casualty Insurance Company and West American Insurance Company, extracts from which read:

Article III, Section 9. Appointment of Attorneys-in-Fact. The Chairman of the Board, the President, any Vice-President, the Secretary or any Assistant Secretary of the corporation shall be and is hereby vested with full power and authority to appoint attorneys-in-fact for the purpose of signing the name of the corporation as surety to, and to execute, attach the seal of the corporation to, acknowledge and deliver any and all bonds, recognizances, stipulations, undertakings or other instruments of suretyship and policies of insurance to be given in favor of any individual, firm, corporation, partnership, limited liability company or other entity, or the official representative thereof, or to any county or state, or any official board or boards of any county or state, or the United States of America or any agency thereof, or to any other political subdivision thereof

This instrument is signed and sealed as authorized by the following resolution adopted by the Boards of Directors of the Companies on October 21, 2004:

RESOLVED, That the signature of any officer of the Company authorized under Article III, Section 9 of its Code of Regulations and By-laws and the Company seal may be affixed by facsimile to any power of attorney or copy thereof issued on behalf of the Company to make, execute, seal and deliver for and on its behalf as surety any and all bonds, undertakings or other written obligations in the nature thereof; to prescribe their respective duties and the respective limits of their authority; and to revoke any such appointment. Such signatures and seal are hereby adopted by the Company as original signatures and seal and shall, with respect to any bond, undertaking or other written obligations in the nature thereof to which it is attached, be valid and binding upon the Company with the same force and effect as though manually affixed.

CERTIFICATE

I, the undersigned Assistant Secretary of The Ohio Casualty Insurance Company and West American Insurance Company, do hereby certify that the foregoing power of attorney, the referenced By-Laws of the Companies and the above resolution of their Boards of Directors are true and correct copies and are in full force and effect on this date.

IN WITNESS WHEREOF, I have hereunto set my hand and the seals of the Companies this **6th day of January, 2009**



S-4300 3/99

Mark E. Schmitt
Assistant Secretary

OATH OF OFFICE

STATE OF FLORIDA

County of Palm Beach

I do solemnly swear (or affirm) that I will support, protect, and defend the Constitution and Government of the United States and of the State of Florida; that I am duly qualified to hold office under the Constitution of the State, and that I will well and faithfully perform the duties of

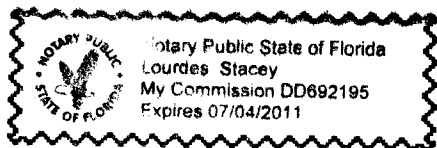
Palm Beach County Supervisor of Elections
(Office)

on which I am now about to enter, so help me God.

Susan Bucher
Signature

Sworn to and subscribed before me this 8 day of January, 2009

L. Stacey
Signature of Officer Administering Oath or of Notary Public - State of Florida



Print, Type, or Stamp Commissioned Name of Notary Public

Personally Known OR Produced Identification

Type of Identification Produced _____

ACCEPTANCE

I accept the office of Palm Beach County Supervisor
of Elections. The above is the Oath of Office taken by me.

In addition to the above office I also hold the office of _____

Mailing Address: Home Office

240 S. Military Trail
Street or Post Office Box

West Palm Beach, FL 33415
City, State, Zip Code

Signature:

Susan Bucher
Print name as you desire commission issued

Susan Bucher
Signature