# Agenda Item #3.M.2.

## PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

# AGENDA ITEM SUMMARY

| Meeting Date: Se   | otember 1, 2009  | [X] Consent<br>[ ] Ordinance  | [ ] Regular<br>[ ] Public Hearing  |  |  |  |  |  |
|--|--|---|--|--|--|--|--|--|
| Department: Pa   | rks and Recreation   |   |  |  |  |  |  |  |
| Submitted By: Parks and Recreation Department                      |  |   |  |  |  |  |  |  |
| Submitted For: Parks and Recreation Department                     |  |   |  |  |  |  |  |  |
|  | <del> </del>   |   |  |  |  |  |  |  |
|  | I. EXECU   | JTIVE BRIEF   |  |  |  |  |  |  |
| allocation to the Pa   | Staff recommends mot<br>arks and Recreation Depa<br>erans' Day and Memorial Da | rtment in an amount no  | reation Assistance Program ot-to-exceed \$4,000 for the  |  |  |  |  |  |
| 11, 2009, at Veterar to be allocated for cooperation with the      | n's Park in Boca Raton. The the Memorial Day event to                          | unexpended funding fro<br>be held in May 2010<br>ition for an expected aud      | vent to be held on November<br>m the Veterans' Day event is<br>These events are held in<br>ience of 250 people. Funding<br>strict 5 (AH) |  |  |  |  |  |
| funded by the Distri<br>chairs, food items,<br>expenses related to | ct 5 Commissioner for the pbeverages, food carts, em                           | past seven years. Eligib<br>ergency medical servic<br>ent of these items will b | Memorial Day event has been<br>le expenses consist of tents,<br>es and other miscellaneous<br>e handled by the Parks and                 |  |  |  |  |  |
| Attachment: Com  | missioner Authorization  |   | ·  |  |  |  |  |  |
| Recommended by   | : <u>Jimis</u><br>Department Direct  | Allma<br>or   | 8/13/69<br>Date  |  |  |  |  |  |
| Approved by:   | Han  |   | 8/24/09  |  |  |  |  |  |
|  | Adeittant County   | Administrator   | Data   |  |  |  |  |  |

#### II. FISCAL IMPACT ANALYSIS

|   | 11. 1 1                              | CAL INIT ACT             | ANALIGIO                 |                          |                          |  |  |
|---|--------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--|--|
| A. Five Year Summary  | of Fiscal Imp                        | act:                     |                          |                          | -                        |  |  |
| Fiscal Years  | 2009                                 | 2010                     | 2011                     | 2012                     | 002013                   |  |  |
| Capital Expenditures Operating Costs External Revenues Program Income (Count) In-Kind Match (County)  | 4,000<br>-0-<br>-0-<br>y) -0-<br>-0- | -0-<br>-0-<br>-0-<br>-0- | -0-<br>-0-<br>-0-<br>-0- | -0-<br>-0-<br>-0-<br>-0- | -0-<br>-0-<br>-0-<br>-0- |  |  |
| NET FISCAL IMPACT   | 4,000                                | 0                        | 0-                       | 0                        | 0                        |  |  |
| # ADDITIONAL FTE POSITIONS (Cumulative  | ) _0_                                |                          |                          | Magniferative 1949 Auto  |                          |  |  |
| Is Item Included in Current Budget? Yes X No<br>Budget Account No.: Fund 3600 Department 583 Unit R915<br>Object 4801 Program N/A   |                                      |                          |                          |                          |                          |  |  |
| B. Recommended Sources of Funds/Summary of Fiscal Impact:   |                                      |                          |                          |                          |                          |  |  |
| FUND: Park Improvement Fund/Recreation Assistance Program UNIT: RAP/Transportation Improvement Fund-District 5  |                                      |                          |                          |                          |                          |  |  |
| Promotl Activities (Ord 86-19) 3600-583-R915-013-4801 \$4,000   |                                      |                          |                          |                          |                          |  |  |
| C. Departmental Fiscal Review:  |                                      |                          |                          |                          |                          |  |  |
|   |                                      |                          |                          |                          |                          |  |  |
| III. REVIEW COMMENTS  |                                      |                          |                          |                          |                          |  |  |
| A. OFMB Fiscal and/or Contract Development and Control Comments:  |                                      |                          |                          |                          |                          |  |  |
| Definition of the state of the |                                      |                          |                          |                          |                          |  |  |
| Assistant County Attor  | x 8/26                               | <u>lc</u> 9              |                          |                          |                          |  |  |
| C. Other Department Review:   |                                      |                          |                          |                          |                          |  |  |

REVISED 10/95 ADM FORM 01

Department Director

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

### Susan Yinger

From:

Vivian Leiva

Sent:

Thursday, July 30, 2009 1:51 PM Susan Yinger

To:

Subject:

Veterans

Susan,

Commissioner Aaronson has authorized \$4,000 from District Five RAP Fund to cover costs associated with Veteran's Day 2009 and/or Memorial Day 2010 events.

Please transfer the necessary funds.

Thanks.

Vivian E. Leiva **Senior Administrative Assistant** to Commissioner Burt Aaronson