

PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: February 23, 2010

Consent

Regular

Ordinance

Public Hearing

Department: Parks and Recreation

Submitted By: Parks and Recreation Department

Submitted For: Parks and Recreation Department

I. EXECUTIVE BRIEF

**Motion and Title:** Staff recommends motion to receive and file: fully executed original Agreement for Recreation Assistance Program (RAP) funding as follows:

Agreement with Martin Luther King, Jr. Coordinating Committee of West Palm Beach, Inc. for the period January 5, 2010, through January 31, 2011, in an amount not-to-exceed \$5,000 for leadership skills workshops.

**Summary:** Delegation of authority for execution of this standard Recreation Assistance Program (RAP) Agreement was approved by the Board on August 18, 2009 (6A-5). Funding is from RAP District 7 Funds. District 7 (AH)

**Background and Policy Issues:** On August 18, 2009, the Board approved funding allocations for four District 7 RAP projects allocated by Commissioner Taylor that replaced two allocations previously awarded by former Commissioner Addie Greene which were not viable projects. At that time, the Board also delegated authority to the County Administrator or his designee to execute Agreements for each project in the amounts stated. This is one of the four approved projects.

The project addressed in this item is fully executed and is now being submitted for receive and file to provide for proper recording and budgeting.

**Attachment:** Fully executed Agreement

Recommended by:   
Department Director

1/29/10  
Date

Approved by:   
Assistant County Administrator

2/12/10  
Date

**II. FISCAL IMPACT ANALYSIS**

**A. Five Year Summary of Fiscal Impact:**

Fiscal Years	2010	2011	2012	2013	2014
Capital Expenditures	<u>5,000</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
Operating Costs	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
External Revenues	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
Program Income (County)	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
In-Kind Match (County)	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
<b>NET FISCAL IMPACT</b>	<u><b>5,000</b></u>	<u><b>-0-</b></u>	<u><b>-0-</b></u>	<u><b>-0-</b></u>	<u><b>-0-</b></u>
<b># ADDITIONAL FTE POSITIONS (Cumulative)</b>	<u>  0</u>	_____	_____	_____	_____

Is Item Included in Current Budget? Yes X No \_\_\_\_\_  
 Budget Account No.: Fund 3600 Department 583 Unit R917  
 Object 8201 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 7

Contributions-Non-Govts Agencies                      3600-583-R917-046-8201                      \$5,000

**C. Departmental Fiscal Review:** ckopelakis

**III. REVIEW COMMENTS**

**A. OFMB Fiscal and/or Contract Development and Control Comments:**

*[Signature]*  
 OFMB  
 2/11/10 *[initials]* 2/11/10  
*[initials]*

*[Signature]*  
 Contract Development and Control

**B. Legal Sufficiency:**

*Anne Delgado* 2/12/10  
 Assistant County Attorney

**C. Other Department Review:**

\_\_\_\_\_  
 Department Director

**AGREEMENT BETWEEN PALM BEACH COUNTY AND MARTIN LUTHER KING, JR.  
COORDINATING COMMITTEE OF WEST PALM BEACH, INC. FOR LEADERSHIP  
SKILLS WORKSHOPS**

**THIS AGREEMENT** is made and entered into on January 5, 2010 by and between Palm Beach County, a political subdivision of the State of Florida, hereinafter referred to as "County" and Martin Luther King, Jr. Coordinating Committee of West Palm Beach, Inc., a Florida not-for-profit corporation, hereinafter referred to as "MLKCC".

**WITNESSETH:**

**WHEREAS**, MLKCC is a not-for-profit organization whose mission is to provide cultural activities to honor Dr. Martin Luther King, Jr. and to enable people to reflect on his life and his teachings through education, performances, exhibitions, and events; and

**WHEREAS**, MLKCC offers Leadership Skills Workshops to provide artistic, cultural, and educational opportunities for youth; and

**WHEREAS**, the Leadership Skills Workshops includes activities for students including artistic, music, essay, oratorical, and cultural performances that lead to developing leadership skills "Programs"; and

**WHEREAS**, the annual budget for the Programs is approximately \$16,000 for contractual services, travel/lodging, rental/marketing, and other miscellaneous expenses; and

**WHEREAS**, MLKCC has requested that County provide \$5,000 to assist in the cost of expenses for said Programs; and

**WHEREAS**, funding for the Programs in an amount not to exceed \$5,000 is available from the Recreation Assistance Program (RAP) District 7; and

**WHEREAS**, educational and cultural programs for youth serve a public benefit; 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. County agrees to fund an amount not-to-exceed \$5,000 to MLKCC to help offset costs for Leadership Skills Workshop for contractual services, travel/lodging, rental/marketing, and other miscellaneous expenses, as described in Exhibit "A", attached hereto and incorporated herein, and hereinafter referred to as the "Project".

2. County will use its best efforts to provide said funds to MLKCC 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 and a Contractual Services Purchases Schedule Form attached hereto and made a part hereof as Exhibit "B", which are required for each and every reimbursement requested by MLKCC. Said information shall list each invoice paid by MLKCC and shall include the vendor invoice number; invoice date; and the amount paid by MLKCC along with the number and date of the respective check or proof of payment for said payment. MLKCC shall attach a copy of each vendor invoice paid by MLKCC along with a copy of the respective check or proof of payment and shall make reference thereof to the applicable item listed on the Contractual Services Purchases Schedule. Further, MLKCC's Program Administrator and Project Financial Officer shall certify the total funds spent by MLKCC on the Project and shall also certify that each vendor invoice, as listed on the Contractual Services Purchases Schedule was paid by MLKCC and approved by MLKCC as indicated.

3. MLKCC incurred expenses for the Project beginning on October 31, 2009. Those costs incurred by MLKCC for the Project, approved and submitted accordingly by MLKCC subsequent to October 31, 2009, are eligible for reimbursement by County pursuant to the terms and conditions hereof.

4. RAP funds may be used as a match for other local, state, or federal grant programs, but MLKCC may not submit reimbursement requests for the same expenses to the County as other fund sources to receive duplicate reimbursement for the same expenses.

5. MLKCC warrants that it is an active not-for-profit corporation, duly chartered and registered with the Florida Department of State, Division of Corporations.

6. MLKCC 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, sexual orientation, gender identity or expression.

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

8. The term of this Agreement shall be until January 31, 2011, commencing upon the date of execution by the parties hereto.

9. The parties agree that, in the event MLKCC is in default of its obligations under this Agreement, the County shall provide MLKCC thirty (30) days written notice to cure the default. In the event MLKCC 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 MLKCC for the Project deemed to be in default and MLKCC shall return any County RAP funds already collected by MLKCC for that 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. This Agreement may be terminated by the County with cause, upon expiration of the thirty (30) day cure period provided for in Section 9 above.

11. MLKCC shall complete the Project by October 31, 2010, and invoices and checks submitted for reimbursement must be dated within the project time frame of October 31, 2009, through October 31, 2010. MLKCC shall provide its final reimbursement request(s), including a project completion statement and reimbursement documentation as indicated in Section 2 above on or before January 31, 2011. Upon written notification to County at least ninety (90) days prior to that date MLKCC may request an extension beyond this period for the purpose of completing the Project. County shall not unreasonably deny MLKCC's request for said extension.

12. In the event MLKCC 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 MLKCC. The determination that MLKCC has ceased or suspended the Project shall be made by County and MLKCC agrees to be bound by County's determination.

13. MLKCC 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 MLKCC. Failure to comply may result in County's refusal to honor reimbursement requests for the Project.

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

15. It is understood and agreed that MLKCC 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, MLKCC 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 MLKCC, its agents, servants and/or employees in the performance of this Agreement. The foregoing indemnification shall survive termination of this Agreement.

In consideration for reimbursement of costs incurred prior to the term of this Agreement, the foregoing indemnification shall apply not only during the term of this Agreement but also for the period prior to this Agreement for which MLKCC is eligible to receive reimbursement from the County.

16. MLKCC shall, at its sole expense, agree to maintain in full force and effect at all times during the life of this Agreement, insurance coverages and limits (including endorsements), as described herein. MLKCC shall agree to provide the County with at least ten (10) day prior notice of any cancellation, non-renewal or material change to the insurance coverages. The requirements contained herein, as well as County's review and acceptance of insurance maintained by MLKCC are not intended to and shall not in any manner limit or qualify the liabilities and obligations assumed by MLKCC under this Agreement.

**Commercial General Liability.** MLKCC shall maintain Commercial General Liability at a limit of liability not less than \$500,000 Each Occurrence. Coverage shall not contain

any endorsement excluding Contractual Liability or Cross Liability unless granted in writing by County's Risk Management Department. MLKCC shall provide this coverage on a primary basis.

**Worker's Compensation Insurance & Employer's Liability.** MLKCC shall maintain Worker's Compensation & Employers Liability in accordance with Florida Statute Chapter 440. MLKCC shall provide this coverage on a primary basis.

**Additional Insured.** MLKCC shall endorse the County as an Additional Insured with a CG 2026 Additional Insured - Designated Person or Organization endorsement, or its equivalent, to the Commercial General Liability. The Additional Insured endorsement shall read "Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees and Agents." MLKCC shall provide the Additional Insured endorsements coverage on a primary basis.

**Waiver of Subrogation.** MLKCC hereby waives any and all rights of Subrogation against the County, its officers, employees and agents for each required policy. When required by the insurer, or should a policy condition not permit an insured to enter into a pre-loss agreement to waive subrogation without an endorsement, then MLKCC shall agree to notify the insurer and request the policy be endorsed with a Waiver of Transfer of Rights of Recovery Against Others, or its equivalent. This Waiver of Subrogation requirement shall not apply to any policy when a condition to the policy specifically prohibits such an endorsement, or voids coverage should MLKCC enter into such an agreement on a pre-loss basis.

**Certificate(s) of Insurance.** Prior to execution of this Agreement by the County, MLKCC shall deliver to the County a Certificate(s) of coverage evidencing that all types and amounts of insurance coverages required by this Agreement have been obtained and are in full force and effect. Such Certificate(s) of Insurance shall include a minimum ten (10) day endeavor to notify due to cancellation or non-renewal of coverage. Certificate holder's address shall read Palm Beach County, c/o Parks and Recreation Department,

2700 Sixth Avenue South, Lake Worth, FL 33461, Attention: Administrative Support Manager.

**Right to Review.** County, by and through its Risk Management Department, in cooperation with the contracting/monitoring department, reserves the right to review, modify, reject or accept any required policies of insurance, including limits, coverages, or endorsements, herein from time to time throughout the term of this Agreement. County reserves the right, but not the obligation, to review and reject any insurer providing coverage because of its poor financial condition or failure to operate legally.

17. Upon request by County, MLKCC shall demonstrate financial accountability through the submission of acceptable financial audits performed by an independent auditor.

18. MLKCC 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 five (5) years. Upon advance notice to MLKCC, County shall have the right to inspect and audit said books, records, documents and other evidence during normal business hours.

19. The County and MLKCC 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.

20. 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.

21. As provided in Section 287.132-133, Florida Statutes, by entering into this Agreement or performing any work in furtherance hereof, MLKCC 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 the thirty six (36) months immediately preceding the date hereof. This notice is required by Section 287.133 (3) (a), Florida Statutes.

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



23. 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:  
Director of Parks and Recreation  
Palm Beach County Parks and Recreation Department  
2700 Sixth Avenue South  
Lake Worth, Florida 33461

As to MLKCC:  
President  
Martin Luther King Coordinating Committee of West Palm Beach, Inc.  
1444 8<sup>th</sup> Street  
West Palm Beach, FL 33401

24. 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.

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

**WITNESSES:**

Louise Kelly  
Theresa Lawrence

**PALM BEACH COUNTY, FLORIDA, ON BEHALF OF ITS BOARD OF COUNTY COMMISSIONERS**

By: Robert Weisman  
Robert Weisman, Designee ~~Chair~~

**WITNESSES:**

Betty Dawson  
Edith C. Bush

**MARTIN LUTHER KING COORDINATING COMMITTEE OF WEST PALM BEACH, INC. FEI Number: 65-0002152**

By: Edith C. Bush  
Name (Type or Print)  
Ex. Director  
Title  
Edith C. Bush  
Signature

**APPROVED AS TO FORM AND LEGAL SUFFICIENCY**

By: Anne Wilford  
County Attorney

**APPROVED AS TO TERMS AND CONDITIONS**

By: Dennis L. Eshleman  
Dennis L. Eshleman, Director  
Parks and Recreation Department

**Recreation Assistance Program (RAP)  
Exhibit "A" to Agreement**

Name of Agency: Martin Luther King, Jr. Coordinating Committee of West Palm Beach, Inc.

Address: 1444 8<sup>th</sup> Street, West Palm Beach, FL 33401

Federal Employer Identification Number: 65-0002152

Name of President: Edith Bush

Name of Executive Director: Edith Bush

Project Liaison Information:

Name: Edith Bush

Telephone #: 561-832-4682

Fax #: 561-655-8397

e-mail: [ebush10339@aol.com](mailto:ebush10339@aol.com)

**PROJECT INFORMATION**

1. Name of Project: Leadership Skills Workshops for artistic, cultural, and educational enrichment opportunities

2. Project Description

- General (Project Scope): Provide activities for students that lead to developing leadership skills. Activities include artistic, music, essay, oratorical and cultural performances.
- Public Purpose: Events will include speakers from the civil rights era. The community will have a broader sense of race relations and how to improve relationships. Events will promote respect, cooperation, and understanding by the audience and participants.
- Location: Various churches, parks, public buildings, Palm Beach County Convention Center
- Anticipated Number of Participants/Users: 600

3. Project Elements: List anticipated broad categories of Expenditure Items such as capital outlay, contractual services, personnel costs, operational expenses, equipment, and "Other Miscellaneous Project expenses". Do not include expenditure line item budget/ amounts.

Contractual Services, travel/lodging, rental/marketing, other miscellaneous expenses

4. Estimated Lump Sum Total for Project: \$ 16,000

5. Project Initiation date (date of first invoice for which reimbursement will be requested) and anticipated End date (date which project will be completed and all invoices paid). 10-31-09 to 10-31-10

Note: Invoices and copies of proof of payment documents will be required for Project/Program reimbursement after the RAP Agreement is approved by the Board of County Commissioners. Do not submit reimbursement documentation at this time. After the Agreement is approved, and the reimbursement request is submitted, all invoices and checks must be dated within the stated project time frame AND Categories for Project Elements must be listed in Section 3 above in order to be eligible for RAP reimbursement.

6. Required Attachments:

Certificate of Insurance   X  

Amount of Recreation Assistance Program Funding awarded

\$ 5,000

District 7

(filled in by County)

Form available online by request. Contact Susan Yinger at [syinger@pbcgov.com](mailto:syinger@pbcgov.com)



PALM BEACH COUNTY  
PARKS AND RECREATION DEPARTMENT

EXHIBIT B

CONTRACT PAYMENT REQUEST

Date \_\_\_\_\_

Grantee: \_\_\_\_\_ Project Name: \_\_\_\_\_

Submission #: \_\_\_\_\_ Reimbursement Period: \_\_\_\_\_

Item	Key	Project Costs This Submission	Cumulative Project Costs
Contractual Services	(C)	_____	_____
Salary & Wages (% of salaries)	(S)	_____	_____
Materials, Supplies, Direct Purchases	(M)	_____	_____
Equipment	(E)	_____	_____
Travel	(T)	_____	_____
Indirect Costs	(I)	_____	_____
<b>TOTAL PROJECT COSTS</b>		=====	=====

Key Legend

- C = Contractual Services
- S = Salary & Wages
- M = Materials, Supplies, Direct Purchases
- E = Equipment
- T = Travel
- I = Indirect Costs

Certification: I hereby certify that the above expenses were incurred for the work identified as being accomplished in the attached progress reports.

Certification: I hereby certify that the documentation has been maintained as required to support the project expenses reported above and is available for audit upon request.

\_\_\_\_\_  
Administrator

Date

\_\_\_\_\_  
Financial Officer

Date

**PBC USE ONLY**

County Funding Participation \$ \_\_\_\_\_

Total Project Costs To Date: \$ \_\_\_\_\_

County Obligation To Date \$ \_\_\_\_\_

County Retainage ( \_\_\_\_\_ %) \$ \_\_\_\_\_

County Funds Previously Disbursed \$ \_\_\_\_\_

County Funds Due this Billing \$ \_\_\_\_\_

Reviewed and Approved By:

\_\_\_\_\_  
PBC Project Administrator

Date

\_\_\_\_\_  
Department Director

Date



**Key Legend**  
 C = Contractual Services  
 S = Salary & Wages  
 M = Materials, Supplies, Direct Purchases  
 E = Equipment  
 T = Travel  
 I = Indirect Costs

**PALM BEACH COUNTY  
 PARKS AND RECREATION DEPARTMENT  
 CONTRACTUAL SERVICES PURCHASE SCHEDULE**

**EXHIBIT B**

Grantee: \_\_\_\_\_  
 Submittal #: \_\_\_\_\_

Date: \_\_\_\_\_  
 Project Name: \_\_\_\_\_  
 Contract Reimbursement Period: \_\_\_\_\_

#	Payee (Vendor/Contractor)	Key	Check or Voucher		Invoice			Expense Description
			Number	Date	Number	Date	Amount	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
					TOTAL \$			

Certification: I hereby certify that the purchases noted above were used in accomplishing this project.

Certification: I hereby certify that bid tabulations, executed contract, cancelled checks, and other purchasing documentation have been maintained as required to support the costs reported above and are available for audit upon request.

\_\_\_\_\_  
 Administrator Date

\_\_\_\_\_  
 Date

**MARTIN LUTHER KING JR.  
COORDINATING COMMITTEE**



1446 RTM Blvd  
West Palm Beach, FL 33411-3046  
P.O. Box 1721  
West Palm Beach, FL 33402-3721  
Tel: (561) 832-4682  
Fax: (561) 855-8857  
Email: [info@mlkcc.com](mailto:info@mlkcc.com)  
[www.mlkcc.com](http://www.mlkcc.com)

**EDITH C. BUSH**  
EXECUTIVE DIRECTOR  
**NYCINTHIA BOSTON**  
PRESIDENT  
**GENEVA BROOKS**  
TREASURER  
**EBERTY POWELL, JR.**  
BUSINESS MANAGER  
**FREDERIA SANDERS**  
SECRETARY

February 9, 2010

ATTN: Susan Ying r  
TO: Department of Parks and Recreation  
2700 6<sup>th</sup> Avenue South  
Lake Worth, FL 33461  
RE: Compensat onCoverage

The State of Florida does not require a certificate of evidencing Workers Compensation Insurance for our agency.

We are an all-volunteer agency and do not transport or provide transportation.

Sincerely,

*Edith C. Bush*  
Edith C. Bush  
Director





# CERTIFICATE OF LIABILITY INSURANCE

OP ID JD  
MARTINL

DATE (MM/DD/YYYY)  
12/08/09

**PRODUCER**  
**HARBOR INSURANCE - BR7**  
 500 Northpoint Pkwy, Ste 200  
 West Palm Beach FL 33407  
 Phone: 561-623-6150 Fax: 561-712-9394

**INSURED**  
 Martin Luther King, Jr. Coord.  
 Committee of W.F.B., Inc.  
 c/o Edith Bush  
 P.O. Box 3721  
 W. Palm Beach FL 33402-3721

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.

INSURERS AFFORDING COVERAGE		NAIC #
INSURER A:	Auto-Owners Insurance Company	18988
INSURER B:	Starr Indemnity & Liability Co	
INSURER C:		
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.

INSURANCE TYPE	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY	72567791	11/09/09	11/09/10	EACH OCCURRENCE \$ 1000000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 5000
	GEN'L AGGREGATE LIMIT APPLIES PER				PERSONAL & ADV. INJURY \$ 1000000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				GENERAL AGGREGATE \$ 1000000
B	AUTOMOBILE LIABILITY				PRODUCTS - COMP/OP AGG \$ 1000000
	<input type="checkbox"/> ANY AUTO				COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per person) \$
	<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> NON-OWNED AUTOS				AUTO ONLY - EA ACCIDENT \$
	GARAGE LIABILITY				OTHER THAN EA ACC AGG \$
	<input type="checkbox"/> ANY AUTO				EACH OCCURRENCE \$
	EXCESS/ UMBRELLA LIABILITY				AGGREGATE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				\$
	<input type="checkbox"/> DEDUCTIBLE				\$
	<input type="checkbox"/> RETENTION \$				\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N			E.L. EACH ACCIDENT \$
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE \$
	OTHER				E.L. DISEASE - POLICY LIMIT \$
B	Special Event Lia	S26L-100000-02	01/16/10	03/07/10	Gen Agg 200000 Per Occ 100000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS  
 Clubs-Civic/Service/Social  
 Palm Beach County Board of County Commissioners, A Political Subdivision of the State of Florida, Its Officers, Employees and Agents, shall be named as additional insured with respects to to general liability on a primary basis.

CERTIFICATE HOLDER	CANCELLATION
Palm Beach County Board of County Commissioners C/O Park Recreation Dept 2700 6th Ave South Lake Worth FL 33461	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 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 <i>Rebecca A. Palmer</i>

ACORD 25 (2009/01)