

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
AGENDA ITEM SUMMARY

Meeting Date: June 8, 2010 ☒ Consent ☐ Regular
 ☐ Ordinance ☐ Public Hearing

Department:
Submitted By: Palm Beach County Sheriff's Office
Submitted For: Palm Beach County Sheriff's Office

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: a Budget Transfer of \$37,500 from the Law Enforcement Trust Fund (LETf) to the Palm Beach County Sheriff's Office (PBSO).

Summary: Florida Statute 932.7055 requires that no less than 15% of the LETf's previous year's revenues be used for the support or operation of drug treatment, drug abuse education, drug prevention, crime prevention, safe neighborhood and school resource officer programs of various non-profit organizations. The PBSO's FY 2010 estimated donation requirement is \$158,962. The funds are requested to aid qualified organizations that meet the requirements set forth in F.S. 932.7055. The PBSO's support of these programs exemplifies its strong commitment to the prevention and reduction of crime throughout the communities it serves and its desire to put money back into these communities to support organizations that provide such services. The current State LETf balance is \$1,799,185. Approval of this request will reduce the State Law Enforcement Trust Fund balance to \$1,761,685. The year-to-date transfer for all donations after approval of this item is \$542,607. The PBSO certifies that the use of these funds is in accordance with F.S. 932.7055. Below is a table indicating the organizations the PBSO seeks to fund and the corresponding amount of funding proposed per respective agency. No new positions are needed and no additional County funds are required. Countywide (DW)

ORGANIZATION	AMOUNT
211 Palm Beach/Treasure Coast, Inc.	\$25,000
Inner City Youth Golfers', Inc.	\$10,000
Safety Council of Palm Beach County, Inc.	\$2,500
Total Amount of Donations	\$37,500

Background and Justification: The Palm Beach County Sheriff's Office has a long-standing commitment to the reduction of crime and implementation of crime and drug prevention programs within Palm Beach County. Use of LETf requires approval by the Board in accordance with F.S. 932.7055, upon request of the Sheriff. This Statute requires that no less than 15 % of the last fiscal year's revenues be donated or expended for the support or operation of drug treatment, drug abuse education, drug prevention, crime prevention, safe neighborhood or school resource officer programs. The PBSO certifies that the use of these funds is in accordance with F.S. 932.7055.

Attachments:

1. Budget Transfer
2. LETf Donation Applications(3)

RECOMMENDED BY: [Signature] 5/26/2010
DEPARTMENT DIRECTOR DATE

APPROVED BY: [Signature] _____
ASSISTANT COUNTY ADMINISTRATOR DATE

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2010	2011	2012	2013	2014
Capital Expenditures					
Operating Costs	\$37,500				
External Revenues	(\$37,500)				
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 _____ Agency _____ Org _____ Object _____

Reporting
Category _____

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

- * The funds are being requested from the State Law Enforcement Trust Fund. No additional County Funds are required.

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Administration Comments:

* No fiscal impact. No additional county funds required.
Funding source is state law enforcement trust fund (LETTF).

[Signature] 5/28/10
OFMB
mcb
5/28/10
5/28/10

[Signature] 6/11/10
Contract Administration

B. Legal Sufficiency:

[Signature] 6/2/10
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 TRANSFER

Page 1 of 1 pages

FUND 1151 LAW ENFORCEMENT TRUST FUND

ACCT.NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	CURRENT BUDGET	INCREASE	DECREASE	ADJUSTED BUDGET	EXPENDED/ ENCUMBERED	REMAINING BALANCE
<u>Expenditures</u>								
<u>Transfers</u>								
160-1690-9498	Trfr to PBSO Fd 1902	0	505,107	37,500	0	\$542,607		
<u>Reserves - New Projects</u>								
160-9900-9908	Reserves - New Projects	2,304,292	1,799,185	0	37,500	1,761,685		
TOTAL FUND				\$37,500	\$37,500			

Palm Beach County Sheriff's Office

INITIATING DEPARTMENT/DIVISION

Administration/Budget Department Approval

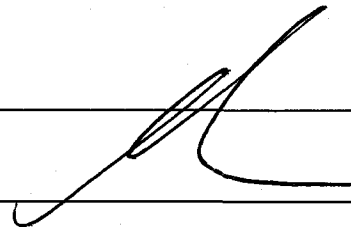
OFMB Department - Posted

Signatures

Date

By Board of County Commissioners
At Meeting of June 8, 2010

Deputy Clerk to the
Board of County Commissioners

 5/26/2010

Attachment 1



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

APPLICATION

1. Legal name of Organization:

211 Palm Beach / Treasure Coast

NAME

2. Address:

P.O. Box 3588

STREET ADDRESS

Lantana, FL 33465

CITY, STATE, ZIP

3. Executive Director:

Susan K. Buza

NAME

SIGNATURE

(561) 533-1099

TELEPHONE NUMBER

E-MAIL ADDRESS

FEID #: 23-7153017

4. Fiscal Agent:

Mindy A. Gonzales

NAME

SIGNATURE

(561) 533-1096

TELEPHONE NUMBER

E-MAIL ADDRESS

5. Date:

February 17, 2010

DATE



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

Organization Name: 211 Palm Beach / Treasure Coast

LETF Funding Request (MUST match total on Financial Application): \$25,000

1. What service will your organization provide through the use of Law Enforcement Trust Funds?
 - ☐ School Resource Officers
 - ☐ Drug Treatment Program
 - ☒ Crime Prevention
 - ☒ Safe Neighborhood
 - ☒ Drug Abuse Education
 - ☒ Drug Prevention Programs
2. Organization Purpose: 211 Palm Beach / Treasure Coast provides Palm Beach County residents with information and referral to health and human service agencies, crisis counseling, and suicide prevention / intervention via telephone 24 hours a day, 365 days a year. 211 also offers two advocacy programs for the elderly—Sunshine Telephone Reassurance and Elder Crisis Outreach.
3. Provide a brief summary of program's activities/services to be funded: 211 is requesting funds for 40% of the salary of a 211 Resource Center specialist and 40% of the salary of an Elder Crisis Outreach advocate. In the 2008 – 2009 Fiscal Year, our Resource Center specialists answered more than 167,000 calls—71% of them from Palm Beach County residents. Elder Crisis Outreach serves Palm Beach County seniors who are in emotional, financial or social distress by providing in-home crisis intervention services. In the 2008 – 2009 Fiscal Year, 477 seniors received assistance through this program.
4. What results are you committed to achieving? 211 callers who report abuse, neglect or other criminal activity will be referred to law enforcement agencies. Callers with substance abuse issues will be referred to various substance abuse programs. Suicidal callers will be "de-escalated" and referred to various mental health agencies. Elder Crisis Outreach advocates will contact Adult Protective Services or law enforcement agencies, as appropriate, when clients exhibit signs of abuse or neglect or when there is evidence that they are being victimized financially. (Please see enclosed Service Snapshot for data on the number of callers with these issues in Fiscal Year 2008 – 2009.)



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

FINANCIAL APPLICATION - Revised

Period Covered (one year) From: 7/1/10

To: 6/30/11

No.	Expense	Program Total	LETF Request	LETF
1.	Salaries	\$778,224	\$21,050	2.7%
2.	Employee Benefits/Payroll Taxes	\$154,304	\$3,950	2.6%
3.	Professional Fees	\$47,586	\$	%
4.	Occupancy/Utilities	\$18,561	\$	%
5.	Telephone	\$52,510	\$	%
6.	Postage/Shipping	\$3,645	\$	%
7.	Printing & Publications	\$20,998	\$	%
8.	Supplies	\$10,455	\$	%
9.	Travel	\$6,675	\$	%
10.	Meetings	\$1,215	\$	%
11.	Miscellaneous Expenses	\$20,277	\$	%
	Total Expenses	\$1,114,450	\$25,000	2.2%



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

Budget Narrative

**Provide detailed description for each expense listed on the Financial Application.
You may attach additional sheets if necessary.**

Salaries (list employees and individual compensation):

Resource Center Specialist: $\$24,509 + \$4,608$ in fringe benefits = $\$29,117$

39% of salary and fringe benefits = $\$11,356$

Elder Crisis Outreach advocate: $\$33,810 + \$6,356$ in fringe benefits = $\$40,166$

33.97% of salary and fringe benefits = $\$13,644$

$\$11,356 + \$13,644 = \$25,000$

Professional Fees (list vendor and type of service provided):

Occupancy/Utilities (list utilities):

Telephone (provide telephone numbers):

Printing & Publications (list type of material):



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

Supplies (list supplies/equipment):

Travel (individuals traveling, destination and purpose):

Meetings (attendees, purpose, items needed for meeting):

Miscellaneous Expense (specify items):



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

APPLICATION CERTIFICATION

I hereby certify that any LETF funds received will be used for the authorized purpose as indicated on Page 3 of this application. Additionally, I certify that the agency requesting the funds is a not-for-profit agency or organization, which has been held to be tax exempt under the provisions of s. 501 of the Internal Revenue Code, and is registered as a Non Profit organization with the State of Florida, Department of State, Division of Corporations.

Susan Buza
Name (please print)

Executive Director
Title (please print)

Susan K. Buza
Signature

2/17/10
Date

NOTARY SECTION:

State of Florida

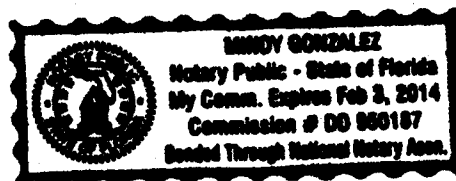
County of Palm Beach

The foregoing Agreement was acknowledged and subscribed before me this 17 day of February, 2010 by Susan K. Buza (name of individual) as Executive Director (title) of 211 Palm Beach/Treasure Coast, NC (name of organization/ agency), who is personally known to me or who produced Personally Known as identification.

Mindy Gonzalez
Notary Public

My Commission Expires:

2/3/14





**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

APPLICATION

1. Legal name of Organization: Inner City Youth Golfers', Inc.

Inner City Youth Golfers', Inc. (ICYG)

NAME

2. Address:

P. O. Box 31901

STREET ADDRESS

Palm Beach Gardens, FL 33420

CITY, STATE, ZIP

3. Executive Director:

Esmeralda H. Knowles

NAME

SIGNATURE

(561) 844-8774 merald@bellsouth.net

TELEPHONE NUMBER

E-MAIL ADDRESS

Tax ID #: 65- 0978868

4. Fiscal Agent:

Barbara B. Coulton

NAME

SIGNATURE

(561) 827-5081 barbarab@nsu.nova.edu

TELEPHONE NUMBER

E-MAIL ADDRESS

5. Date:

02/27/2010

DATE



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

Organization Name: Inner City Youth Golfers', Inc. (ICYG)

LET Fund Request (MUST match total on Financial Application): \$10,000.

1. What service will your organization provide through the use of Law Enforcement Trust Funds?

- ☐ School Resource Officers
- ☐ Drug Treatment Program
- ☐ Crime Prevention
- ☐ Safe Neighborhood
- ☒ Drug Abuse Education
- ☐ Drug Prevention Programs

2. Organization Purpose: ICYG was established to fill a community need for at risk children of ages 7-18. Our program mandates participation by the parents or guardians. We use the game of golf as a catalyst to cause children to refocus their attention on doing the right things -- "golf is the karat and education is the key." Our initiative is: "Say No To Drugs -- Say Yes To Education, Golf, Culture." In addition to our focused community school areas, we also desire to add Lake Park, Town of Mangonia Park, Gramercy Park Development and Schall Circle Housing Development.

3. Provide a brief summary of program's activities/services to be funded: To continue providing our youth, parents and guardians with drug abuse educational information from various creditable federal, public and private sources and from our web site (www.icyg.org); to integrate drug abuse education and information in our clinics, camps and greenside chit chats; to host drug education assemblies at schools, churches and other forums where our youth meet and workshops for our youth golfers; to divert the attention of some of our youth from their neighborhoods by hosting cultural and educational tours, youth golf camps, clinics and other activities that give our youth positive experiences.

4. What results are you committed to achieving? To keep our youth off the streets and out of the gangs; to educate our youth, parents and guardians about drug abuse; to underscore the importance of doing the right things in life; to teach them to be good citizens; to instill in our youth the life skills of honesty, punctuality and good sportsmanship and to introduce our youth to various collegiate and golf careers. We will continuously seek to instill a sense of right and wrong about the use of drugs and the consequences that come with the wrong decision in using drugs. There is a direct independent correlation between an individual choosing the correct golf club and in fact executing it correctly alone and leaving drugs alone.



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

FINANCIAL APPLICATION

Period Covered (one year) From: 05 / 01 / 2010

To: 04 / 30 / 2011

No.	Expense	Program Total	LETF Request	LETF
1.	Salaries	\$0	\$0	0%
2.	Employee Benefits/Payroll Taxes	\$0	\$0	0%
3.	Professional Fees	\$ 10,000.00	\$ 1,200.00	12%
4.	Occupancy/Utilities	\$ 1,800.00	\$0	0%
5.	Telephone	\$ 1,500.00	\$ 1500.00	100%
6.	Postage/Shipping	\$ 1,500.00	\$ 500	33.3%
7.	Printing & Publications	\$ 8,000.00	\$ 1,800.00	22.5%
8.	Supplies	\$ 7,000.00	\$ 2,000.00	28.5%
9.	Travel	\$ 15,000.00	\$ 0	0%
10.	Meetings	\$ 4,000.00	\$ 1,500.00	37.5%
11.	Miscellaneous Expenses	\$ 5,000.00	\$ 1,500.00	30%
	Total Expenses	\$ 53,800.00	\$ 10,000.00	18.5%

1) Founder Malachi Knowles and Executive Director Esmeralda Knowles receive no salaries from any of their programs.

2) Because of the economy we were not able to raise enough money for our programs.



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

Budget Narrative

**Provide detailed description for each expense listed on the Financial Application.
You may attach additional sheets if necessary.**

Salaries (list employees and individual compensation): -0-

Professional Fees (list vendor and type of service provided): Motivational speakers, Drug Educators, Law Enforcement Personnel and professionals from other organizations shall be used as presenters of drug education information. Golf professionals shall be used to provide organized golf life skills lessons to replace any bad behavior and teach our youth.

Occupancy/Utilities (list utilities): -0-

Telephone (provide telephone numbers): Local, long distance and email communications to youth, parental participants, for locating materials, develop schedules and to manage the program , web site domain maintenance and management, etc.

Printing & Publications (list type of material): Program flyers, reading material, training lessons, releases and brochures. Educational materials will be packaged from Palm Beach County Sheriff's Department and School District: National Clearinghouse for Drug Information; The Florida Department of Children and Families and others. We will continue producing more pictures and classroom information for teachers and other to use from our web site at www.icvg.org



PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION

Attachment A

Supplies (list supplies/equipment): The supplies ("Say No To Drugs-Say Yes To Education Culture & Golf" water bottles, pencils, T-shirts, book marks and any other equipment will continue to be directly supportive of the above activities where materials are used: videos, tapes, film, worksheets, workbooks, paper, pens, movies, tees, golf balls, golf clubs, golf life skills games and literature, prizes, etc.

Travel (individuals traveling, destination and purpose): - 0

Meetings (attendees, purpose, items needed for meeting): Youth golfers, parents, teachers and ICYG volunteers will provide life skills camps, drug education workshops, assemblies, speakers; green side chat chats, open dialogue for our youth to explore and understand the evils of drugs. Other required supplies, overhead teaching equipment, projectors, etc shall be used to assist us in delivery of our message.

Miscellaneous Expense (specify items): This includes cultural, educational and golf access and training tools; unforeseen items not included above: treats, refreshments, food, certificates, awards, local parking, gas, etc.



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

APPLICATION CERTIFICATION

I hereby certify that any LETF funds received will be used for the authorized purpose as indicated on Page 3 of this application. Additionally, I certify that the agency requesting the funds is a not-for-profit agency or organization, which has been held to be tax exempt under the provisions of s. 501 of the Internal Revenue Code, and is registered as a Non Profit organization with the State of Florida, Department of State, Division of Corporations.

ESMERALDA H. Knowles
Name (please print)

Executive Director
Title (please print)

Esmeralda H Knowles
Signature

3/1/2010
Date

NOTARY SECTION:

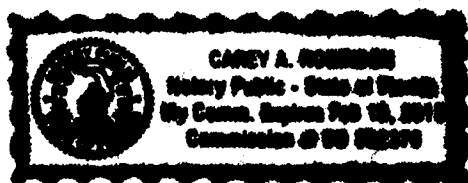
State of Florida

County of Palm Beach

The foregoing Agreement was acknowledged and subscribed before me this 1st day of March, 2010 by ESMERALDA H. KNOWLES (name of individual) as _____ (title) of _____ (name of organization/ agency), who is personally known to me or who produced FL DL K542-208-59-677-0 as identification.

[Signature]
Notary Public

My Commission Expires: 02-18-2013





**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

APPLICATION

1. **Legal name of Organization:** Safety Council of Palm Beach County Inc

Toni Burrows

NAME

2. **Address:**

4152 W. Blue Heron Blvd Suite 110

STREET ADDRESS

Riviera Beach Fl 33404

CITY, STATE, ZIP

3. **Executive Director:**

Toni Burrows

NAME

SIGNATURE

(561) 845-8233

TELEPHONE NUMBER

Toni@safetycouncilpbc.org

E-MAIL ADDRESS

FEID #: 59- 1168121

4. **Fiscal Agent:**

Safety Council of Palm Beach County Inc.

NAME

Toni Burrows

SIGNATURE

(561)845-8233

TELEPHONE NUMBER

Toni@safetycouncilpbc.org

E-MAIL ADDRESS

5. **Date:**

3/2/10

DATE



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

Organization Name: Safety Council of Palm Beach County Inc

LETTF Funding Request (MUST match total on Financial Application): \$2500.00

1. What service will your organization provide through the use of Law Enforcement Trust Funds?

- ☐ School Resource Officers
- ☐ Drug Treatment Program
- ☐ Crime Prevention
- ☒ Safe Neighborhood
- ☐ Drug Abuse Education
- ☐ Drug Prevention Programs

2. Organization Purpose: Mobile Eyes Program

3. Provide a brief summary of program's activities/services to be funded: _____

The Mobile Eyes program combats impaired driving by enlisting the help of Palm Beach County citizens. Since 2004 the Traffic Safety Committee of the Palm Beaches has implemented the Mobile Eyes program in our county. When a citizen sees what seems to be an impaired driver they call 911 and report it to the police. The communications center dispatches the appropriate police agency. If an arrest is made then the person who made the phone call receives a \$100.00 reward. The arresting agency must code the call as a Mobile Eyes call and fax the information sheet to the Safety Council. 100% of your donation goes to fund the rewards.

4. What results are you committed to achieving? _____

We know that Mobile Eyes will reduce the amount of drunk drivers on the road and discourage people from wanting to take the chance of driving intoxicated. The ultimate goal of Mobile Eyes is to increase the impaired driver's paranoia and make him or her reluctant to drive, because the driver behind him will most likely have a cell phone. The single greatest deterrent to impaired driving is the threat of apprehension. Mobile Eyes maximizes that threat while helping law enforcement



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

FINANCIAL APPLICATION

Period Covered (one year) From: 02____/09____/_10____ To 02____/08____/_11____

No.	Expense	Program Total	LET Request	LET
1.	Salaries	\$0	\$	%
2.	Employee Benefits/Payroll Taxes	\$0	\$	%
3.	Professional Fees	\$0	\$	%
4.	Occupancy/Utilities	\$0	\$	%
5.	Telephone	\$0	\$	%
6.	Postage/Shipping	\$0	\$	%
7.	Printing & Publications	\$0	\$	%
8.	Supplies	\$0	\$	%
9.	Travel	\$0	\$	%
10.	Meetings	\$0	\$	%
11.	25- \$100.00 Mobile Eyes Rewards	\$2,500.00	\$2,500.00	100%
	Total Expenses	\$2,500.00	\$2,500.00	100%



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

Budget Narrative

**Provide detailed description for each expense listed on the Financial Application.
You may attach additional sheets if necessary.**

Salaries (list employees and individual compensation): No salaries

Professional Fees (list vendor and type of service provided): _____

No professional fees

Occupancy/Utilities (list utilities): _____

N/A

Telephone (provide telephone numbers): _____

n/a

Printing & Publications (list type of material): _____

n/a



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

Supplies (list supplies/equipment):
no supplies. We do print the form for the police agencies. However, the Safety Council provides one
copy to each agency that they may duplicate.

Travel (individuals traveling, destination and purpose):

Meetings (attendees, purpose, items needed for meeting):

Miscellaneous Expense (specify items): Mobile Eyes Rewards. With this \$2,500.00 we will
be able to give 25 \$100.00 rewards to people who call in and report impaired drivers. The responding
police agency must witness the impaired driving for the caller to be eligible for the reward.



**PALM BEACH COUNTY SHERIFF'S OFFICE
LAW ENFORCEMENT TRUST FUND DONATION**

Attachment A

APPLICATION CERTIFICATION

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Toni Burrows

Executive Vice-President

Name (please print)

Title (please print)

Toni Burrows
Signature

3-2-10
Date

NOTARY SECTION:

State of Florida

County of Palm Beach

The foregoing Agreement was acknowledged and subscribed before me this 2nd day of March, 2010 by Toni Burrows (name of individual) as Exec. V. President (title) of Safety Council of PBC, Inc. (name of organization/ agency), who is personally known to me or who produced _____ as identification.

Leslie McKenna
Notary Public

My Commission Expires:

