

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS  
AGENDA ITEM SUMMARY**

Meeting Date: April 5, 2011

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: the return of \$10,022 in unexpended Violent Crime and Drug Control Investigation grant funds and \$6,148 in accrued interest to the Florida Department of Law Enforcement.

**Summary:** On March 11, 2008, the Palm Beach County Sheriff's Office (PBSO) was awarded a FY07 Violent Crime and Drug Control Investigation grant by the Florida Department of Law Enforcement (FDLE), Violent Crime & Drug Control Council, for the period of December 6, 2007 through the completion of the investigation. PBSO concluded its investigation due to operational issues. FDLE disbursed funding in advance and requires the return of unexpended grant funds and accrued interest at the end of the grant period. Countywide (GB)

**Background and Justification:** Pursuant to County PPM #CW-F-003, the return of these funds requires the approval of the Board of County Commissioners.

Attachments: *None*

RECOMMENDED BY: \_\_\_\_\_

DEPARTMENT DIRECTOR

*3/23/11*  
DATE

APPROVED BY: *pat* \_\_\_\_\_

ASSISTANT COUNTY ADMINISTRATOR

*3/30/11*  
DATE

**II. FISCAL IMPACT ANALYSIS**

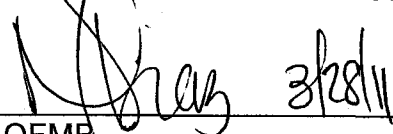

**A. Five Year Summary of Fiscal Impact:**

<b>Fiscal Years</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>
Capital Expenditures					
Operating Costs	\$(16,170)				
External Revenues	\$16,170				
Program Income (County)					
In-Kind Match (County)	_____				
 Net Fiscal Impact	 \$0				
 # Additional FTE Positions (Cumulative)					
Is Item Included in Current Budget:	YES	<u>X</u>	NO	_____	_____
Budget Account No.:	Fund <u>1152</u>	Agency <u>160</u>	Org <u>2121</u>	Object <u>3429</u>	
Reporting Category	_____				

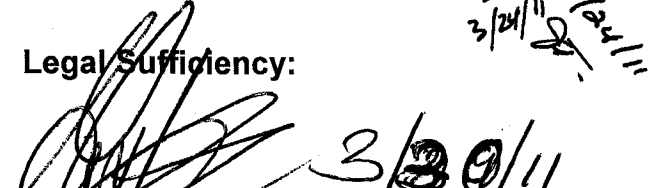
**B. Recommended Sources of Funds / Summary of Fiscal Impact:**

**III. REVIEW COMMENTS**

**A. OFMB Fiscal and/or Contract Administration Comments:**

 _____ OFMB	 _____ Contract Administration
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**B. Legal Sufficiency:**

  
 \_\_\_\_\_  
 Assistant County Attorney

**C. Other Department Review:**

\_\_\_\_\_

Department Director

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