

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2013	2014	2015	2016	2017
Capital Expenditures					
Operating Costs	624,911	1,874,733			
External Revenue	(399,150)	(1,197,448)			
Program Income					
In-Kind Match (County)					
NET FISCAL IMPACT	225,761	677,285			

# ADDITIONAL FTE POSITIONS (Cumulative)					
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Is Item Included in Current Budget: Yes _____ No X

Budget Account No:

Fund 1006 Dept. 144 Unit 1443/1472/1481/1482 Obj. Var. Prgm Code Var. Prgm Per. GY13

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

Funding sources are the State of Florida, Palm Beach County and Private Donations (Program Income). Sufficient funding is included in the current budget to meet County obligations.

<u>Funds</u>	<u>13-14 CCE</u>	<u>13-14 ADI</u>	<u>13-14 HCE</u>	<u>13-14 RELIEF</u>	<u>13-14 Total</u>
State	1,204,532	230,810	14,141	108,000	1,557,483
Program Income	32,970	6,145	0	0	39,115
Match (10%)	116,433	0	0	0	116,433
Addl. Cnty Funds	<u>441,690</u>	<u>152,404</u>	<u>54,364</u>	<u>138,155</u>	<u>786,613</u>
Total	1,795,625	389,359	68,505	246,155	2,499,644

C. Departmental Fiscal Review: DM
Taruna Malhotra, Director, Financial & Support Svcs.

III. REVIEW COMMENTS

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

Susan Neary 10/30/13
OFMB KN SC SS 10/20 10/24 ce 030

James J. Jacobson 10/31/13
Contract Development and Control

B. Legal Sufficiency:

[Signature] 11/1/13
Chief Assistant County Attorney

C. Other Department Review:

Department Director

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

Background and Justification: (from page 1) ADI ensures, through case management, that seniors afflicted with Alzheimer's and other forms of dementia are provided essential services. CCE allows DOSS to assist seniors and caregivers by providing in-home services to help seniors live independently and defers the need for more costly institutional care by providing seniors case management, case aide and essential services. HCE provides case management to seniors and provides caregivers with resources to afford care in family-type living setting, as an alternative to institutional care. RELIEF provides in-home respite by trained stipend volunteers; and EHEAP provides emergency energy assistance to eligible seniors.

This RENEWAL is entered into by the Area Agency on Aging of Palm Beach/Treasure Coast, hereinafter referred to as the "Agency" and Palm Beach County Board of County Commissioners, hereinafter referred to as "Provider" and renews Agreement #IZ012-9500.

As stated on Page 2, Section 5 of Agreement IZ012-9500, by mutual Agreement of the Parties, in accordance with s. 287.058(1) (g), F.S., the Agency may renew the Agreement for a period not to exceed three years, or the term of the original Agreement, whichever is longer. The renewal price, or method for determining a renewal price, is set forth in the bid, proposal, or reply. No other costs for the renewal may be charged. Any renewal is subject to the same terms and conditions as the original Agreement and contingent upon satisfactory performance evaluations by the Agency and the availability of funds

The purpose of this Renewal is to outline the funding allocation for the 2013-2014 Agreement period. Additionally, this renewal (1) amends paragraph D of the Standard Agreement; (2) revises Attachment I, Section III, A of the Standard Agreement; (3) revises and replaces Attachment II, Budget Summary; (4) revises and replaces Attachment III, Rate Schedule.

STANDARD AGREEMENT:

(1) Paragraph D of the Standard Agreement is hereby amended to read:

D. Agreement Amount

The Agency agrees to pay for contracted services according to the terms and conditions of this Agreement in an amount not to exceed \$230,810.00, or the rate schedule, with expenditures to be based upon an approved annual budget, subject to adjustment in accordance with Attachment II and subject to the availability of funds. Any costs or services paid for under any other contract or agreement or from any other source are not eligible for payment under this Agreement. These funds are allocated for the period July 1, 2013 through June 30, 2014.

Funding Allocation				
Program Title	Year	Funding Sources	CSFA	Amount
Alzheimer's Disease Initiative (ADI)	2013	General Revenue	65.004	\$230,810.00
TOTAL AGREEMENT AMOUNT:				\$230,810.00

(2) Attachment I, Section III, A of the Standard Agreement is hereby amended to read:

SECTION III: METHOD OF PAYMENT

A. STATEMENT OF METHOD OF PAYMENT

This is a fixed rate for services Agreement. The Agency agrees to pay for contracted services according to the terms and conditions of this Agreement in an amount not to exceed **\$230,810.00**, subject to the availability of funds.

(3) Attachment II, Budget Summary, is replaced with the following Attachment II.

Attachment II

BUDGET SUMMARY

ADI Client Services	\$214,653.00
ADI Case Management	\$ 16,157.00
Total	\$230,810.00

(4) Attachment III, ADI Rate Sheet, is replaced with the following Attachment III.

ATTACHMENT III

ADI RATE SHEET

SERVICE	REIMBURSABLE UNIT RATE
CAREGIVER TRAIN/SUPPORT (GRP)	\$0.00
CAREGIVER TRAIN/SUPPORT (INDV)	\$0.00
CASE AIDE	\$0.00
CASE MANAGEMENT	\$41.26
COUNSELING	\$0.00
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL	\$0.00
GERONTOLOGICAL COUNSELING	\$0.00
MODEL DAY CARE	\$0.00
OTHER SERVICES	\$0.00
RESPITE	\$17.23
RESPITE IN-FACILITY	\$10.23
SUPPLIES/SERVICES	\$0.00

This Renewal shall be effective on the last date that the Renewal has been signed by both Parties.

All provisions in the Agreement and any attachments thereto in conflict with this Renewal shall be and are hereby changed to conform with this Renewal.

All provisions not in conflict with this Renewal are still in effect and are to be performed at the level specified in the Agreement.

This Renewal and all of its attachments are hereby made a part of this Agreement.

IN WITNESS WHEREOF, the parties hereto have caused this 5 page Renewal to be executed by their officials there unto duly authorized.

Provider: **PALM BEACH COUNTY, FLORIDA,**
A Political Subdivision of the State of
Florida

AREA AGENCY ON AGING OF PALM
BEACH/TREASURE COAST, INC.

SIGNED

BY: _____
Steven L. Abrams, Mayor

SIGNED BY: _____

DATE: _____

SHARON R. BOCK, Clerk and Comptroller

NAME: _____

BY: _____

TITLE: _____

DATE: _____

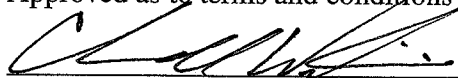
DATE: _____

Federal Tax ID: 59-6000785
Fiscal Year Ending Date: _____

Approved as to form and legal sufficiency

Chief Assistant County Attorney

Approved as to terms and conditions



Department Director

This RENEWAL is entered into by the Area Agency on Aging of Palm Beach/Treasure Coast, hereinafter referred to as the "Agency" and Palm Beach County Board of County Commissioners, hereinafter referred to as "Provider" and renews Agreement #IC012-9500.

As stated on Page 2, Section 5 of Agreement IC012-9500, by mutual Agreement of the Parties, in accordance with s. 287.058(1) (g), F.S., the Agency may renew the Agreement for a period not to exceed three years, or the term of the original Agreement, whichever is longer. The renewal price, or method for determining a renewal price, is set forth in the bid, proposal, or reply. No other costs for the renewal may be charged. Any renewal is subject to the same terms and conditions as the original Agreement and contingent upon satisfactory performance evaluations by the Agency and the availability of funds

The purpose of this Renewal is to outline the funding allocation for the 2013-2014 Agreement period. Additionally, this renewal (1) amends paragraph D of the Standard Agreement; (2) revises Attachment I, Section III, A of the Standard Agreement; (3) revises and replaces Attachment II, Budget Summary; (4) revises and replaces Attachment III, Rate Schedule.

STANDARD AGREEMENT:

(1) Paragraph D of the Standard Agreement is hereby amended to read:

D. Agreement Amount

The Agency agrees to pay for contracted services according to the terms and conditions of this Agreement in an amount not to exceed \$1,047,904.00, or the rate schedule, with expenditures to be based upon an approved annual budget, subject to adjustment in accordance with Attachment II and subject to the availability of funds. Any costs or services paid for under any other contract or agreement or from any other source are not eligible for payment under this Agreement. These funds are allocated for the period July 1, 2013 through June 30, 2014.

Funding Allocation				
Program Title	Year	Funding Sources	CSFA	Amount
Community Care for the Elderly (CCE)	2013	General Revenue	65.010	\$1,047,904.00
TOTAL AGREEMENT AMOUNT:				\$1,047,904.00

(2) Attachment I, Section III, A of the Standard Agreement is hereby amended to read:

SECTION III: METHOD OF PAYMENT

A. STATEMENT OF METHOD OF PAYMENT

This is a fixed rate for services Agreement. The Agency agrees to pay for contracted services according to the terms and conditions of this Agreement in an amount not to exceed **\$1,047,904.00**, subject to the availability of funds.

(3) Attachment II, Budget Summary, is replaced with the following Attachment II.

ATTACHMENT II

BUDGET SUMMARY

1. CCE Client Services	\$838,323.00
2. CCE Case Management	\$188,623.00
3. CCE Case Aide	\$20,958.00
4. Total	\$1,047,904.00

(4) Attachment III, CCE Rate Sheet, is replaced with the following Attachment III.

ATTACHMENT III

CCE RATE SHEET

SERVICE	REIMBURSABLE UNIT RATE
ADULT DAY CARE	\$10.23
ADULT DAY HEALTH CARE	\$0.00
CAREGIVER TRAIN/SUPPORT (GRP)	\$0.00
CAREGIVER TRAIN/SUPPORT (INDV)	\$0.00
CASE AIDE	\$24.29
CASE MANAGEMENT	\$41.26
CHORE	\$15.06
CHORE (ENHANCED)	\$0.00
CHORE (ENHANCED) - VENDOR PAYMENT	\$0.00
COMPANIONSHIP	\$15.06
CONSUMABLE MEDICAL SUPPLIES	\$0.00
COUNSELING (GERONTOLOGICAL) - INDIVIDUAL	\$71.01
COUNSELING (MENTAL HEALTH COUNSELING/SCREENING) - INDIVIDUAL	\$0.00
EMERGENCY ALERT RESONSE - INSTALLATION	\$0.00
EMERGENCY ALERT RESPONSE	\$0.87
ESCORT	\$15.06
GERONTOLOGICAL COUNSELING	\$0.00
HEALTH SUPPORT	\$0.00
HOME DELIVERED MEALS	\$0.00
HOME HEALTH AIDE	\$0.00
HOME NURSING	\$0.00
HOMEMAKER	\$15.06
HOUSING IMPROVEMENT	\$0.00
LEGAL SERVICES	\$0.00
MATERIAL AID	\$0.00
MEDICATION MANAGEMENT	\$0.00
NURSING SERVICES	\$0.00
NUTRITION COUNSELING	\$0.00
NUTRITION EDUCATION	\$0.00
OCCUPATIONAL THERAPY	\$0.00
OTHER SERVICES	\$0.00
PERSONAL CARE	\$15.06
PEST CONTROL INITIATION	\$0.00
PEST CONTROL MAINTENANCE	\$0.00
PHYSICAL THERAPY	\$0.00

JULY 2013

RENEWAL AGREEMENT IC012-9500

RESPIRE	\$15.06
RESPIRE IN-FACILITY	\$0.00
RISK REDUCTION FINANCIAL ASSES	\$0.00
RISK REDUCTION FINANCIAL MAINT	\$0.00
RISK REDUCTION NUTRITIONAL	\$0.00
RODENT CONTROL INITIATION	\$0.00
RODENT CONTROL MAINTENANCE	\$0.00
SHOPPING ASSISTANCE	\$0.00
SPECIALIZED MEDICAL EQUIPMENT & SUPPLIES	\$1.00
SPEECH THERAPY	\$0.00
SUPPLIES/SERVICES	\$0.00
TRANSPORTATION	\$0.00

This Renewal shall be effective on the last date that the Renewal has been signed by both Parties.

All provisions in the Agreement and any attachments thereto in conflict with this Renewal shall be and are hereby changed to conform with this Renewal.

All provisions not in conflict with this Renewal are still in effect and are to be performed at the level specified in the Agreement.

This Renewal and all of its attachments are hereby made a part of this Agreement.

IN WITNESS WHEREOF, the parties hereto have caused this 6 page Renewal to be executed by their officials there unto duly authorized.

Provider: PALM BEACH COUNTY, FLORIDA,
A Political Subdivision of the State of
Florida

**AREA AGENCY ON AGING OF PALM
BEACH/TREASURE COAST, INC.**

SIGNED

BY: _____
Steven L. Abrams, Mayor

SIGNED BY: _____

DATE: _____

SHARON R. BOCK, Clerk and Comptroller

NAME: _____

BY: _____

TITLE: _____

DATE: _____

DATE: _____

Federal Tax ID: 59-6000785
Fiscal Year Ending Date: _____

Approved as to form and legal sufficiency

Chief Assistant County Attorney

Approved as to terms and conditions



Department Director

This AMENDMENT, entered into by the Area Agency on Aging of Palm Beach/Treasure Coast, Inc., hereinafter referred to as the "Agency", and Palm Beach County Board of County Commissioners, hereinafter referred to as the "Provider" and collectively referred to as the "Parties", amends Agreement IC012-9500.

The purpose of this amendment is to increase the overall total funding of the July 2013 Renewal Agreement by \$156,628.00 and to revise ATTACHMENT II, BUDGET SUMMARY.

These increased funds are to be used solely to serve new elders on the waitlist who have been classified as a rank of five or higher.

Additionally, this amendment (1) amends Paragraph D, of the Standard Agreement; (2) amends Attachment I, Section III. A; and (3) revises and replaces ATTACHMENT II, Budget Summary.

STANDARD AGREEMENT:

(1) Paragraph D of the Standard Agreement, is hereby amended to read:

D. Agreement Amount

The Agency agrees to pay for contracted services according to the terms and conditions of this Agreement in an amount not to exceed \$1,204,532.00, or the rate schedule, with expenditures to be based upon an approved annual budget, subject to adjustment in accordance with Attachment II and subject to the availability of funds. Any costs or services paid for under any other contract or agreement or from any other source are not eligible for payment under this agreement. These funds are allocated for the period July 1, 2013 through June 30, 2014.

Funding Allocation				
Program Title	Year	Funding Sources	CSFA	Amount
Community Care for the Elderly (CCE)	2013	General Revenue	65.010	\$1,204,532.00
TOTAL AGREEMENT AMOUNT:				\$1,204,532.00

(2) Attachment I, Section III, A of the Standard Agreement is hereby amended to read:

SECTION III: METHOD OF PAYMENT

A. STATEMENT OF METHOD OF PAYMENT

This is a fixed rate for services Agreement. The Agency agrees to pay for contracted services according to the terms and conditions of this Agreement in an amount not to exceed \$1,204,532.00, subject to the availability of funds.

- (3) Attachment II, Budget Summary is replaced with the following Attachment II.

ATTACHMENT II

BUDGET SUMMARY

1. CCE Client Services	\$963,625.00
2. CCE Case Management	\$216,816.00
3. CCE Case Aide	\$24,091.00
4. Total	\$1,204,532.00

This amendment shall be effective on the last date that the amendment has been signed by both Parties.

All provisions in the Agreement and any attachments thereto in conflict with this amendment shall be and are hereby changed to conform with this amendment.

All provisions not in conflict with this amendment are still in effect and are to be performed at the level specified in the Agreement.

This amendment and all of its attachments are hereby made a part of this Agreement.

IN WITNESS WHEREOF, the parties hereto have caused this 4 page amendment to be executed by their officials there unto duly authorized.

Provider: PALM BEACH COUNTY, FLORIDA,
A Political Subdivision of the State of
Florida

**AREA AGENCY ON AGING OF PALM
BEACH/TREASURE COAST, INC.**

SIGNED
BY: _____

~~Robert Weisman, County Administrator~~
Steven L. Abrams, Mayor

DATE: _____

SHARON R. BOCK, Clerk and Comptroller

SIGNED BY: 

NAME: Michael Dyer

TITLE: Board Chair

BY: _____

DATE: _____

DATE: 8/22/2013

Federal Tax ID: 59-6000785

Fiscal Year Ending Date:

Approved as to form and legal sufficiency

Chief Assistant County Attorney

Approved as to terms and conditions

Department Director

Attestation Statement

Agreement/Contract Number IC012-9500

Amendment Number 002

I, ~~Robert Weisman, County Administrator~~^{Steven I. Abrams, Mayor}, attest that no changes or revisions have
(*Provider Representative*)

been made to the content of the above referenced agreement/contract or amendment between the Area Agency on Aging and Palm Beach County Board of County Commissioners. The only exception to this statement would be for changes in page formatting, due to the differences in electronic data processing media, which has no affect on the agreement/contract content.

Signature of Provider Representative

Date

This RENEWAL is entered into by the Area Agency on Aging of Palm Beach/Treasure Coast, hereinafter referred to as the "Agency" and Palm Beach County Board of County Commissioners, hereinafter referred to as "Provider" and renews Agreement #IH012-9500.

As stated on Page 2, Section 5 of Agreement IH012-9500, by mutual Agreement of the Parties, in accordance with s. 287.058(1) (g), F.S., the Agency may renew the Agreement for a period not to exceed three years, or the term of the original Agreement, whichever is longer. The renewal price, or method for determining a renewal price, is set forth in the bid, proposal, or reply. No other costs for the renewal may be charged. Any renewal is subject to the same terms and conditions as the original Agreement and contingent upon satisfactory performance evaluations by the Agency and the availability of funds

The purpose of this Renewal is to outline the funding allocation for the 2013-2014 Agreement period. Additionally, this renewal (1) amends paragraph D of the Standard Agreement; (2) revises Attachment I, Section III, A of the Standard Agreement; (3) revises and replaces Attachment II, Budget Summary; (4) revises and replaces Attachment III, Rate Schedule.

STANDARD AGREEMENT:

(1) Paragraph D of the Standard Agreement is hereby amended to read:

D. Agreement Amount

The Agency awards for services according to the statement of work, ATTACHMENT I of this agreement in an amount not to exceed \$14,141.00 subject to the availability of funds. The Agency will provide a spending authority in the amount of \$123,685.00 for client services. Any costs or services paid for under any other contract or agreement or from any other source are not eligible for payment under this agreement. The Provider agrees to utilize the approved rate sheet, ATTACHMENT III for contracted services the Agency agrees to pay for. These funds are allocated for the period July 1, 2013 through June 30, 2014.

Funding Allocation				
Program Title	Year	Funding Sources	CSFA	Amount
Home Care for the Elderly (HCE)	2013	General Revenue	65.001	\$14,141.00
TOTAL AGREEMENT AMOUNT:				\$14,141.00

(2) Attachment I, Section III, A of the Standard Agreement is hereby amended to read:

SECTION III: METHOD OF PAYMENT

A. STATEMENT OF METHOD OF PAYMENT

This is a fixed rate for services Agreement. The Agency agrees to pay for contracted services according to the terms and conditions of this Agreement in an amount not to exceed \$123,685.00, subject to the availability of funds.

(3) Attachment II, Budget Summary, is replaced with the following Attachment II.

ATTACHMENT II

BUDGET SUMMARY

1. Spending Authority for HCE Subsidies	\$123,685.00
2. HCE Case Management	\$8,291.00
3. Background Screening for Caregivers	\$5,850.00
4. Total	\$137,826.00

(4) Attachment III, HCE Rate Sheet, is replaced with the following Attachment III.

ATTACHMENT III

HCE RATE SHEET

SERVICE	REIMBURSABLE UNIT RATE
BASIC SUBSIDY	\$106.00
OTHER - BACKGROUND SCREEN - VENDOR	\$85.25
OTHER - BACKGROUND SCREEN - RETENTION - VENDOR	\$6.00
CASE AIDE	\$0.00
CASE MANAGEMENT	\$51.30
RESPITE	15.92
SUPPLIES/SERVICES (AVERAGE COST)	\$33.00
SUPPLIES/SERVICES MEDICAL-VENDOR PAYMENT (AVERAGE COST)	\$0.00

This Renewal shall be effective on the last date that the Renewal has been signed by both Parties.

All provisions in the Agreement and any attachments thereto in conflict with this Renewal shall be and are hereby changed to conform with this Renewal.

All provisions not in conflict with this Renewal are still in effect and are to be performed at the level specified in the Agreement.

This Renewal and all of its attachments are hereby made a part of this Agreement.

IN WITNESS WHEREOF, the parties hereto have caused this 5 page Renewal to be executed by their officials there unto duly authorized.

Provider: PALM BEACH COUNTY, FLORIDA,
A Political Subdivision of the State of
Florida

**AREA AGENCY ON AGING OF PALM
BEACH/TREASURE COAST, INC.**

SIGNED

BY: _____
Steven L. Abrams, Mayor

SIGNED BY: _____

DATE: _____

SHARON R. BOCK, Clerk and Comptroller

NAME: _____

BY: _____

TITLE: _____

DATE: _____

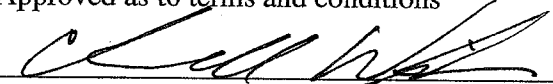
DATE: _____

Federal Tax ID: 59-6000785
Fiscal Year Ending Date: _____

Approved as to form and legal sufficiency

Chief Assistant County Attorney

Approved as to terms and conditions



Department Director

This RENEWAL is entered into by the Area Agency on Aging of Palm Beach/Treasure Coast, hereinafter referred to as the "Agency" and Palm Beach County Board of County Commissioners, hereinafter referred to as "Provider" and renews Agreement #IR012-9500.

As stated on Page 2, Section 5 of Agreement IR012-9500, by mutual Agreement of the Parties, in accordance with s. 287.058(1) (g), F.S., the Agency may renew the Agreement for a period not to exceed three years, or the term of the original Agreement, whichever is longer. The renewal price, or method for determining a renewal price, is set forth in the bid, proposal, or reply. No other costs for the renewal may be charged. Any renewal is subject to the same terms and conditions as the original Agreement and contingent upon satisfactory performance evaluations by the Agency and the availability of funds

The purpose of this Renewal is to outline the funding allocation for the 2013-2014 Agreement period. Additionally, this renewal (1) amends paragraph D of the Standard Agreement; (2) revises Attachment I, Section III, A of the Standard Agreement; (3) revises and replaces Attachment VII, Budget Summary.

STANDARD AGREEMENT:

(1) Paragraph D of the Standard Agreement is hereby amended to read:

D. Agreement Amount

The Agency agrees to pay for contracted services according to the statement of work, ATTACHMENT I of this Agreement in an amount not to exceed \$108,000.00 subject to the availability of funds. Any costs or services paid for under any other contract or agreement or from any other source are not eligible for payment under this Agreement. These funds are allocated for the period July 1, 2013 through June 30, 2014.

Funding Allocation				
Program Title	Year	Funding Sources	CSFA	Amount
Respite for Elders Living in Everyday Families (RELIEF)	2013 - 2014	General Revenue	65.006	\$108,000.00
TOTAL AGREEMENT AMOUNT:				\$108,000.00

(2) Attachment I, Section III, A of the Standard Agreement is hereby amended to read:

SECTION III: METHOD OF PAYMENT

A. STATEMENT OF METHOD OF PAYMENT

This is a fixed rate for services Agreement. The Agency agrees to pay for contracted services according to the terms and conditions of this Agreement in an amount not to exceed \$108,000.00, subject to the availability of funds.

(3) Attachment VII, Budget Summary, is replaced with the following Attachment VII.

ATTACHMENT VII

RESPITE FOR ELDERS LIVING IN EVERYDAY FAMILIES

BUDGET SUMMARY

The unit rate payable under this contract is outlined below, which shall be submitted to the Agency on DoEA Form 109.

Hours of Service	Units	Unit Rate	
14,897	1 unit = 1 hour of service	7.25	\$108,000.00

The unit rate includes a volunteer stipend and covers other volunteer expenses such as volunteer recruitment and retention, volunteer training, and service related travel.

This Renewal shall be effective on the last date that the Renewal has been signed by both Parties.

All provisions in the Agreement and any attachments thereto in conflict with this Renewal shall be and are hereby changed to conform with this Renewal.

All provisions not in conflict with this Renewal are still in effect and are to be performed at the level specified in the Agreement.

This Renewal and all of its attachments are hereby made a part of this Agreement.

IN WITNESS WHEREOF, the parties hereto have caused this 4 page Renewal to be executed by their officials there unto duly authorized.

Provider: **PALM BEACH COUNTY, FLORIDA,**
A Political Subdivision of the State of
Florida

AREA AGENCY ON AGING OF PALM
BEACH/TREASURE COAST, INC.

SIGNED BY: _____
Steven L. Abrams, Mayor

SIGNED BY: _____

DATE: _____

SHARON R. BOCK, Clerk and Comptroller

NAME: _____

BY: _____

TITLE: _____

DATE: _____

DATE: _____

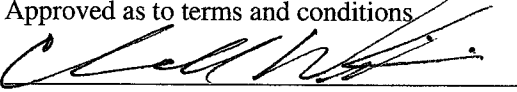
Federal Tax ID: 59-6000785

Fiscal Year Ending Date: _____

Approved as to form and legal sufficiency

Chief Assistant County Attorney

Approved as to terms and conditions



Department Director

**BOARD OF COUNTY COMMISSIONERS
PALM BEACH COUNTY, FLORIDA
BUDGET AMENDMENT
FUND 1006 DOSS - Administration**

BGRV - 144- 091613*655
BGEX - 144- 091613*2044

Use this form to provide budget for items not anticipated in the budget.

ACCT.NUMBER	ACCOUNT NAME	ORIGINAL BUDGET	CURRENT BUDGET	INCREASE	DECREASE	ADJUSTED BUDGET	EXPENDED/ ENCUMBERED AS OF 9/30/13	REMAINING BALANCE
REVENUES								
DOSS-ADI								
144-1472-3469	State Grant Other Human Services	230,810	174,220	173,108		347,328		
DOSS-HCE								
144-1481-3469	State Grant Other Human Services	14,141	12,285	10,606		22,891		
DOSS-CCE								
144-1443-3469	State Grant Other Human Services	1,022,684	979,080	948,861		1,927,941		
DOSS-RELIEF								
144-1482-3469	State Grant Other Human Services	96,266	107,042	83,934		190,976		
	Total Receipts and Balances	7,592,929	7,937,267	1,216,509	0	9,153,776		
EXPENDITURES								
DOSS-ADI								
144-1472-3401	Other Contractual Services	228,606	278,137	173,108		451,245	256,700	194,545
DOSS-HCE								
144-1481-4007	Travel-Mileage	610	3,610	10,606		14,216	367	13,849
DOSS-CCE								
144-1443-3401	Other Contractual Services	1,064,879	1,204,848	948,861		2,153,709	1,191,098	962,611
DOSS-RELIEF								
144-1482-4931	Allowances	185,175	195,951	83,934		279,885	166,798	113,087
	Total Appropriations & Expenditures	7,592,929	7,937,267	1,216,509	0	9,153,776		

Signatures

Date

By Board of County Commissioners
At Meeting of November 5, 2013

COMMUNITY SERVICES

INITIATING DEPARTMENT/DIVISION Channell Wilkins

Mal

Administration/Budget Department Approval

OFMB Department - Posted

Deputy Clerk to the
Board of County Commissioners