

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

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**Meeting Date:** February 6, 2018       **Consent**       **Regular**  
 **Public Hearing**

**Department**

**Submitted By:** COUNTY ATTORNEY

**Submitted For:**

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**I. EXECUTIVE BRIEF**

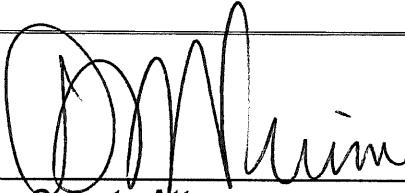
**Motion and Title:** **Staff recommends motion to receive and file:** the official transcript for the closing of the Palm Beach County, Florida, \$5,000,000 Adjustable Mode Revenue Bonds (Oxbridge Academy Foundation, Inc., Project Series 2017A); and the Palm Beach County, Florida, \$2,000,000 Adjustable Mode Revenue Bonds (Oxbridge Academy Foundation, Inc., Project Series 2017B) (the "Bonds").

**Summary:** The official transcript for the Bonds has been provided. This transcript should now be received and filed in the Minutes Department. Countywide (DB).

**Background and Justification:** The Minutes Department has requested that the transcript be presented as "receive and file" for acceptance into the official records of the Board of County Commissioners of Palm Beach County.

**Attachments:**

- 1. Official Transcript (may be viewed in the Office of the County Attorney or the Minutes Department).
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**Recommended by:**       1/8/18  
County Attorney      Date

**Approved by:** \_\_\_\_\_ N/A \_\_\_\_\_  
Date

**II. FISCAL IMPACT ANALYSIS**

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

Fiscal Years	2018	2019	2020	2021	2022
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
<b>*NET FISCAL IMPACT</b>	<u>0</u>	_____	_____	_____	_____
<b># ADDITIONAL FTE POSITIONS (Cumulative)</b>	_____	_____	_____	_____	_____

Is Item Included in Current Budget? Yes \_\_\_ No x

Budget Account No.: Fund \_\_\_\_\_ Department \_\_\_\_\_ Unit \_\_\_\_\_ Object \_\_\_\_\_  
Reporting Category \_\_\_\_\_

**B. Recommended Sources of Funds/Summary of Fiscal Impact:**  
No fiscal impact.

**C. Departmental Fiscal Review:** \_\_\_\_\_

**III. REVIEW COMMENTS**

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

<p><u>[Signature]</u> 1/19/18 OFMB 1/17/18</p>	<p><u>[Signature]</u> 1/18/18 Contract Development and Control</p>
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**B. Legal Sufficiency:**

[Signature] 1/8/18  
Assistant County Attorney

**C. Other Department Review:**

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

**THIS SUMMARY IS NOT TO BE USED AS A BASIS FOR PAYMENT.**