

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2018	2019	2020	2021	2022
Capital Expenditures					
Operating Costs	\$175,000				
External Revenues	(\$175,000)				
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

Does this item include the use of federal funds: YES _____ NO X

Budget Account No.: Fund 1151 Agency 160 Org 1690/9900 Object 9498/9902

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:

Lisa Ponce 8/21/18
180
8/21 OFMB (PD) 8/21 8/20

Ann J. Jacobson 8/22/18
Contract Administration 8/22/18

B. Legal Sufficiency:

Assistant County Attorney 8/23/18
Assistant County Attorney

C. Other Department Review:

Department Director

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

18-0922

BOARD OF COUNTY COMMISSIONERS
PALM BEACH COUNTY, FLORIDA
BUDGET TRANSFER

FUND 1151 LAW ENFORCEMENT TRUST FUND

BGEX 082118*1759

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	1,731,883	175,000	0	1,906,883	1,366,003	540,880
<u>Reserves - New Projects</u>								
160-9900-9902	Reserves - Operating Reserves	2,689,268	953,475	0	175,000	778,475		
TOTAL FUND				\$175,000	\$175,000			

Palm Beach County Sheriff's Office

Signatures

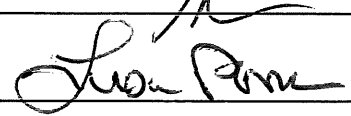
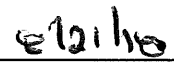
Date

By Board of County Commissioners
At Meeting of September 18, 2018

INITIATING DEPARTMENT/DIVISION

Administration/Budget Department Approval

OFMB Department - Posted

Deputy Clerk to the
Board of County Commissioners



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

Attachment A

APPLICATION

Organization Name: Area Agency on Aging Palm Beach, Treasure Coast, Inc.

FEID #: 65-0087858

Web Address: www.YourADRC.org

Address: 4400 North Congress Ave.

STREET ADDRESS

West Palm Beach, FL 33407

CITY, STATE, ZIP

Executive Director: Jaime Estremera-Fitzgerald

NAME

SIGNATURE

561-684-5885

jestremera@YourADRC.org

TELEPHONE NUMBER

E-MAIL ADDRESS

Fiscal Agent: Marina Ford

NAME

SIGNATURE

561-684-5885

Mford@yourADRC.org

TELEPHONE NUMBER

E-MAIL ADDRESS

Date:

12/22/17

DATE



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

Attachment A

Organization Name: Area Agency on Aging Palm Beach, Treasure Coast, Inc.

LETFF Funding Request (**MUST match total on Financial Application**): \$15,000.00

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

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

Organization Purpose:

To promote, support and advocate for the independence, dignity and wellbeing of seniors, adults with disabilities, and those who care for them in a manner that values diversity, reflects the communities we serve and embraces the collaboration of the aging network

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

The Area Agency on Aging provides intensive services targeted at the 18-20% of seniors who are victimized multiple times and appear to meet the definition of vulnerable under Florida Statute 825. Services will include:

1. Assessment of Financial Capacity. 2 Creation of an individual financial safety plan that specifically addresses the reported crimes/exploitation and vulnerabilities revealed by the financial capacity assessment with services such as such as:
 - A. changing bank accounts (educating on convenience acct etc.)
 - B. challenging failure of banks to repay fraudulent withdrawals/charges (Identity Theft First Aid Kit)

What results are you committed to achieving?

We will assist 65 at risk seniors with intensive financial safety plans.
We will provide 25 senior outreach events and
We will provide crime prevention information to 5000 seniors



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

Attachment A

FINANCIAL APPLICATION

Period Covered (one year) From: July 1, 2018 To: June 30, 2019

No.	Expense	Program Total	LETF Request	LETF
1.	Salaries	\$96,523.00	\$7,000.00	7.25%
2.	Employee Benefits/Payroll Taxes	\$24,131.25	\$1,400.00	5.80%
3.	Professional Fees	\$300.00	\$300.00	100.00%
4.	Occupancy/Utilities	\$18,373.00	\$2,385.00	12.98%
5.	Telephone	\$3,000.00	\$300.00	10.00%
6.	Postage/Shipping	\$4,332.00	\$300.00	6.93%
7.	Printing & Publications	\$5,700.00	\$725.00	12.72%
8.	Supplies	\$2,000.00	\$400.00	20.00%
9.	Travel	\$1,900.00	\$300.00	15.79%
10.	Meetings			0.00%
11.	Miscellaneous Expenses	\$4,700.00	\$1,890.00	40.21%
	Total Expenses	\$160,959.25	\$15,000.00	9.32%



**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):

Two Part Time Elder Crime Intervention Specialist
@ \$18.75 x 12.31hr. x 52 weeks = \$7,000.00 (rounded). Employee benefits, taxes and retirement @
20% of Salary = \$1,400.00 (rounded).

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

Consultants and other professional fees for service @ \$25.00 x 12 months = \$300.00 (rounded)

Occupancy/Utilities (list utilities):

64 square feet of space (8 x 8) cubicle x \$23 sq. ft. and Electricity @ \$76.08 x 12mo. (rounded).

Telephone (provide telephone numbers):

Monthly cellular, local and long distance phone service to communicate with seniors and family
members.
@ \$25 x 12mo. = \$300

Printing & Publications (list type of material):

Printing and copying costs for written communication, flyers, forms and any other material that needs to
be relayed or communicated @ \$60.42 x 12mo = \$725. Postage/Shipping of flyers, forms and other
communication to seniors @ \$25x12mo = \$300(rounded).



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

Attachment A

Supplies (list supplies/equipment):

Office supplies includes folders, letterhead, envelopes, tape, pencils, pens, staples and paper.
@ \$33.34 x 12mo = \$400 (rounded).

Travel (individuals traveling, destination and purpose):

Staff & volunteer advocates mileage expense for 20 prevention presentations.
@ 57 miles X 12mo. X \$.445= \$300.00 (rounded)

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

Miscellaneous Expense (specify items):

Staff and volunteer training, equipment and software maintenance and general insurances including property, flood, liability, directors & officers and Background Screening @\$157.50 x 12mo = \$1,890. (rounded).



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

Attachment A

Disclosure re: Organization's background:

Has the applicant or any of the Organization's officers, directors, trustees, or principal salaried executive personnel been enjoined in any jurisdiction from soliciting contributions or have been found to have engaged in unlawful practices in the solicitation of contributions or administration of charitable assets? Yes No If Yes, please provide the details

Has the Organization had its registration or authority denied, suspended, or revoked by any governmental agency? Yes No If yes, please provide the reasons for such denial, suspension, or revocation

Has the applicant or any of the Organization's officers, directors, or trustees, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony within the last 10 years? Yes No If yes, provide the name of such person, the nature of the offense, the date of the offense, the court having jurisdiction in the case, the date of conviction or other disposition, and the disposition of the offense.

Has the applicant or any of the Organization's officers, directors, or trustees, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or has been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any crime involving fraud, theft, larceny, embezzlement, fraudulent conversion, or misappropriation of property, within the last 10 years? Yes No If yes, provide the name of such person, the nature of the offense, the date of the offense, the court having jurisdiction in the case, the date of conviction or other disposition, and the disposition of the offense.

Has the applicant or any of the Organization's officers, directors, or trustees, been enjoined from violating any law relating to a charitable solicitation? Yes No If yes, provide the name of such person, the date of the injunction, and the court issuing the injunction.



**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 purposes as indicated on Pages 2 through 6 of this application. I further certify that any funds received shall be used prudently and in such a manner as to avoid any appearance of extravagance, waste, or impropriety. I certify that the responses provided in this application are true and correct to the best of my knowledge and understand that any omissions, untruthfulness, or misrepresentations contained herein shall disqualify the Organization from further consideration or may result in revocation and/or reimbursement of awarded LETF funds. Additionally, I certify that the organization requesting the funds is either (a) a governmental agency, (b) a Florida not-for-profit 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, or (c) a Non-Florida not-for-profit 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, Department, Division (Not-for-profit organizations with headquarters outside of Florida)

Jaime Estremera-Fitzgerald
Name (please print)

CEO

Title (please print)

[Signature]
Signature

12/22/17
Date

NOTARY SECTION:

State of Florida

County of Palm Beach

The foregoing Agreement was acknowledged and subscribed before me this 22nd day of

December, 2017 by Jaime Estremera-Fitzgerald (name of individual) as
CEO (title) of Area Agency on Aging Palm Beach/Treasure Coast (name of
organization/ agency), who is personally known to me or who produced

[Signature] as identification.

[Signature]

Notary Public



Katelyn M. Kramer
Commission # GG149719
Expires: October 9, 2021
Bonded thru Aaron Notary

My Commission Expires: 10/9/2021



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

Attachment A

APPLICATION

Organization Name: Mental Health Association of Palm Beach County, Inc.

FEID #: 59-0760220

Web Address: mhapbc.org

Address: 909 Fern St
STREET ADDRESS

West Palm Beach, FL. 33401
CITY, STATE, ZIP

Executive Director: Pamela Gionfriddo
NAME

SIGNATURE

561-832-3755

pgionfriddo@mhapbc.org

TELEPHONE NUMBER

E-MAIL ADDRESS

Fiscal Agent: Pamela Gionfriddo
NAME

SIGNATURE

561-832-3755

pgionfriddo@mhapbc.org

TELEPHONE NUMBER

E-MAIL ADDRESS

Date: 11-27-2017
DATE



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

Attachment A

Organization Name: Mental Health Association of Palm Beach County, Inc.

LETf Funding Request (MUST match total on Financial Application): \$10,000.00

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

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

Organization Purpose:

The Mental Health Association of Palm Beach County (MHAPBC) has been dedicated to improving the lives of people who are touched by mental illness and addiction. MHAPBC is working to help people with services through our helpline (801-HELP) and our Peer Place Support Center.

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

MHA's Peer Place Support Center offers aftercare, behavioral health services, and education to people with mental illnesses and addictions. We now have 5 certified Peer Specialists, who provide effective mentoring services. We have recently begun outreach into the community into hospitals.

Provide a navigation helpline for behavioral health (802-HELP)

Provide up to 75 support groups per month at Peer Place.

Help train people with behavioral health concerns and provide supported employment.

Provide a safe place for people to gather who need our services.

What results are you committed to achieving?

Have at least 6000 visits per year from people with behavioral health concerns.

Prevent re-hospitalization and incarceration of people with behavioral health concerns.

Help people regain stability, prevent isolation, and prevent suicide.

Improve quality of life by providing peer support, tools and education.



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

Attachment A

FINANCIAL APPLICATION

Period Covered (one year) From: July 1, 2018 To: June 30, 2019

No.	Expense	Program Total	LETF Request	LETF
1.	Salaries	\$180,153.00	\$8,000.00	4.44%
2.	Employee Benefits/Payroll Taxes	\$19,171.00	\$800.00	4.17%
3.	Professional Fees	\$16,500.00	\$600.00	3.64%
4.	Occupancy/Utilities	\$8,250.00	\$400.00	4.85%
5.	Telephone	\$5,200.00	\$200.00	3.85%
6.	Postage/Shipping	\$750.00		0.00%
7.	Printing & Publications	\$2,500.00		0.00%
8.	Supplies	\$4,000.00		0.00%
9.	Travel	\$0.00		0.00%
10.	Meetings	\$0.00		0.00%
11.	Miscellaneous Expenses	\$0.00		0.00%
	Total Expenses	\$236,524.00	\$10,000.00	4.23%



**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):

Director of Peer Services: (FT) \$45,000 plus \$5,625 benefits = \$50,625
Peer Services Coordinator: (FT) \$38,000 plus \$4,750 benefits = \$42,750
Peer Mentors: (5 - PT) \$79,653 plus \$6,608 benefits = \$86,261
VP of Programs: (25%) \$17,500 plus \$2,188 benefits = \$19,688

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

Fiscal Analyst: financial services
Legal Aid: legal services

Occupancy/Utilities (list utilities):

Electric/Water
Building Maintenance

Telephone (provide telephone numbers):

561-832-3755 - Fern Street Office (\$5,200 annually)
561-712-0584 - Peer Place (\$5,200 annually)
561-801-4357 - Helpline (\$5,200 annually)

Printing & Publications (list type of material):

Peer Place outreach materials



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

Attachment A

Supplies (list supplies/equipment):

Food for Peer Place visitors/members
Writing utensils/paper

Travel (individuals traveling, destination and purpose):

N/A

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

N/A

Miscellaneous Expense (specify items):

N/A



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

Attachment A

Disclosure re: Organization's background:

Has the applicant or any of the Organization's officers, directors, trustees, or principal salaried executive personnel been enjoined in any jurisdiction from soliciting contributions or have been found to have engaged in unlawful practices in the solicitation of contributions or administration of charitable assets? Yes No If Yes, please provide the details

Has the Organization had its registration or authority denied, suspended, or revoked by any governmental agency? Yes No If yes, please provide the reasons for such denial, suspension, or revocation

Has the applicant or any of the Organization's officers, directors, or trustees, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony within the last 10 years? Yes No If yes, provide the name of such person, the nature of the offense, the date of the offense, the court having jurisdiction in the case, the date of conviction or other disposition, and the disposition of the offense.

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Has the applicant or any of the Organization's officers, directors, or trustees, been enjoined from violating any law relating to a charitable solicitation? Yes No If yes, provide the name of such person, the date of the injunction, and the court issuing the injunction.



**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 purposes as indicated on Pages 2 through 6 of this application. I further certify that any funds received shall be used prudently and in such a manner as to avoid any appearance of extravagance, waste, or impropriety. I certify that the responses provided in this application are true and correct to the best of my knowledge and understand that any omissions, untruthfulness, or misrepresentations contained herein shall disqualify the Organization from further consideration or may result in revocation and/or reimbursement of awarded LETF funds. Additionally, I certify that the organization requesting the funds is either (a) a governmental agency, (b) a Florida not-for-profit 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, or (c) a Non-Florida not-for-profit 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

Mental Health Association of Palm Beach County, Inc.

State, Department, Division (Not-for-profit organizations with headquarters outside of Florida)

Pamela Gionfriddo

Chief Executive Officer

Name (please print)

Title (please print)

Pamela Gionfriddo

11-28-17

Signature

Date

NOTARY SECTION:

State of Florida

County of Palm Beach

The foregoing Agreement was acknowledged and subscribed before me this 28th day of November, 2017 by Pamela Gionfriddo (name of individual) as Chief Executive Officer (title) of Mental Health Association of PBC (name of organization/ agency), who is personally known to me or who produced

_____ as identification.

Mary Ann Roman

Notary Public



Mary Ann Roman
COMMISSION # FF156644
EXPIRES: Sept. 21, 2018
WWW.AARONOTARY.COM

My Commission Expires: _____



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

Attachment A

APPLICATION

Organization Name: Palm Beach County PAL, Inc.

FEID #: 65-0461384

Web Address: www.pbcpal.org

Address: 3228 Gun Club Rd

STREET ADDRESS

Weest Palm Beach

CITY, STATE, ZIP

Executive Director: Scott Scrivner

NAME

Scrivner, Scott L.

Digitally signed by Scrivner, Scott L.
DN: dc=org, dc=pbso, ou=People,
ou=PAL Program, cn=Scrivner, Scott L.
Date: 2017.12.14 14:51:33 -05'00'

SIGNATURE

561 687-6771

pbcpal@pbso.org

TELEPHONE NUMBER

E-MAIL ADDRESS

Fiscal Agent: Dale Sisson

NAME

SIGNATURE

561 688-3248

sissond@pbso.org

TELEPHONE NUMBER

E-MAIL ADDRESS

Date: 12/14/2017

DATE



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

Attachment A

Organization Name Palm Beach County PAL, Inc.

LETF Funding Request (MUST match total on Financial Application): \$25,000.00

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

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

Organization Purpose:

It is the Palm Beach County Police Athletic League's (PAL's) mission to build partnerships between youth, law enforcement, and the community through recreational and educational programs designed to encourage, enhance and develop good citizenship and improve the quality of life in Palm Beach County.

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

Western Communities (Tri-City) Summer Basketball Camp, June 4 - July 27, 2018. We will utilize Glades Central High School for Ages 13-17 and will use Lake Shore Middle School for ages 7-12. Each camp will house 100 youth for a total of 200 youth being served for this 8 week period. Lunch and snacks will be provided each day to the youth. The Camp will include Life Skills including: nutrition, financial, health, education, drug prevention, gang prevention sessions.

What results are you committed to achieving?

Teach youth core life skills such as discipline, teamwork, respect, ethics, diversity, promptness and professionalism along with basketball skills. Create trust and positive bonds and relationships between the community and law enforcement (deputies).



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

Attachment A

FINANCIAL APPLICATION

Period Covered (one year) From: July 1, 2018 To: June 30, 2019

No.	Expense	Program Total	LETF Request	LETF
1.	Salaries	\$33,280.00	\$25,000.00	75.12%
2.	Employee Benefits/Payroll Taxes			0.00%
3.	Professional Fees			0.00%
4.	Occupancy/Utilities			0.00%
5.	Telephone			0.00%
6.	Postage/Shipping			0.00%
7.	Printing & Publications			0.00%
8.	Supplies	\$1,000.00		0.00%
9.	Travel			0.00%
10.	Meetings			0.00%
11.	Miscellaneous Expenses			0.00%
	Total Expenses	\$34,280.00	\$25,000.00	72.93%



**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):

8 camp instructors - 13/hr, 8 hrs/day, 40 days = \$4160/instructor = \$33,280 (instructors will be paid via stipend and issued a 900 afterwards)

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):

Misc equipment for the camps, basketball, training aids, etc..

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

Disclosure re: Organization's background:

Has the applicant or any of the Organization's officers, directors, trustees, or principal salaried executive personnel been enjoined in any jurisdiction from soliciting contributions or have been found to have engaged in unlawful practices in the solicitation of contributions or administration of charitable assets? Yes No If Yes, please provide the details

Has the Organization had its registration or authority denied, suspended, or revoked by any governmental agency? Yes No If yes, please provide the reasons for such denial, suspension, or revocation

Has the applicant or any of the Organization's officers, directors, or trustees, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony within the last 10 years? Yes No If yes, provide the name of such person, the nature of the offense, the date of the offense, the court having jurisdiction in the case, the date of conviction or other disposition, and the disposition of the offense.

Has the applicant or any of the Organization's officers, directors, or trustees, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or has been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any crime involving fraud, theft, larceny, embezzlement, fraudulent conversion, or misappropriation of property, within the last 10 years? Yes No If yes, provide the name of such person, the nature of the offense, the date of the offense, the court having jurisdiction in the case, the date of conviction or other disposition, and the disposition of the offense.

Has the applicant or any of the Organization's officers, directors, or trustees, been enjoined from violating any law relating to a charitable solicitation? Yes No If yes, provide the name of such person, the date of the injunction, and the court issuing the injunction.



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

Attachment A

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State, Department, Division (Not-for-profit organizations with headquarters outside of Florida)

Scott Scrivner

Director

Name (please print)

Title (please print)

Signature

Date

12/22/2017

NOTARY SECTION:

State of Florida

County of Palm Beach

The foregoing Agreement was acknowledged and subscribed before me this 22nd day of

December, 2017 by Scott Scrivner (name of individual) as

Director (title) of PBC PAL

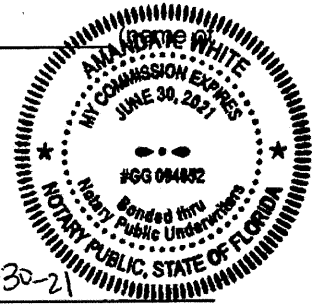
organization/ agency), who is personally known to me or who produced

as identification.

awhite

Notary Public

My Commission Expires: 6-30-21





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

Attachment A

APPLICATION

Organization Name: Palm Beach County PAL, Inc.

FEID #: 65-0461384

Web Address: www.pbcpal.org

Address: 3228 Gun Club Rd

STREET ADDRESS

Weest Palm Beach

CITY, STATE, ZIP

Executive Director: Scott Scrivner

NAME

Scrivner, Scott L.

Digitally signed by Scrivner, Scott L.
DN: dc=org, dc=pbso, ou=People,
ou=PAL Program, cn=Scrivner, Scott L.
Date: 2017.12.14 14:51:33 -05'00'

SIGNATURE

561 687-6771

pbcpal@pbso.org

TELEPHONE NUMBER

E-MAIL ADDRESS

Fiscal Agent: Dale Sisson

NAME

Sisson, Dale L.

Digitally signed by Sisson, Dale L.
DN: dc=org, dc=pbso, ou=People,
ou=Information Technology, cn=Sisson, Dale L.
Date: 2017.12.18 09:16:26 -05'00'

SIGNATURE

561 688-3248

sissond@pbso.org

TELEPHONE NUMBER

E-MAIL ADDRESS

Date: 12/14/2017

DATE



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

Attachment A

Organization Name: Palm Beach County PAL, Inc.

LETF Funding Request (MUST match total on Financial Application): \$25,000.00

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

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

Organization Purpose:

It is the Palm Beach County Police Athletic League's (PAL's) mission to build partnerships between youth, law enforcement, and the community through recreational and educational programs designed to encourage, enhance and develop good citizenship and improve the quality of life in Palm Beach County.

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

Tutoring program for youth at the Cabana Colony Youth Center and the Westgate Recreation Center. Teachers from local area schools are selected to assist with the program. (2) teachers per day, \$22/hour, 3 hours per day, 4 days per week, 32 weeks for the school year.

What results are you committed to achieving?

Assist the youth with getting to school level in both reading and math. Youth are tested and identified and if they are below two levels they are entered into the tutoring program. It is easy to say, these youth would never have this opportunity with out this financial assistance.



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

Attachment A

FINANCIAL APPLICATION

Period Covered (one year) From: July 1, 2018 To: June 30, 2019

No.	Expense	Program Total	LETF Request	LETF
1.	Salaries	\$33,792.00	\$25,000.00	73.98%
2.	Employee Benefits/Payroll Taxes			0.00%
3.	Professional Fees			0.00%
4.	Occupancy/Utilities			0.00%
5.	Telephone			0.00%
6.	Postage/Shipping			0.00%
7.	Printing & Publications			0.00%
8.	Supplies			0.00%
9.	Travel			0.00%
10.	Meetings			0.00%
11.	Miscellaneous Expenses			0.00%
	Total Expenses	\$33,792.00	\$25,000.00	73.98%



**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):

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

each site will have (2) tutors (teachers), each tutor cost 8,448 per school year. 16,896 for each site (Cabana Colony & Westgate) Total cost will be \$33,792, PAL is asking for \$25,000.

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

Disclosure re: Organization's background:

Has the applicant or any of the Organization's officers, directors, trustees, or principal salaried executive personnel been enjoined in any jurisdiction from soliciting contributions or have been found to have engaged in unlawful practices in the solicitation of contributions or administration of charitable assets? Yes No If Yes, please provide the details

Has the Organization had its registration or authority denied, suspended, or revoked by any governmental agency? Yes No If yes, please provide the reasons for such denial, suspension, or revocation

Has the applicant or any of the Organization's officers, directors, or trustees, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony within the last 10 years? Yes No If yes, provide the name of such person, the nature of the offense, the date of the offense, the court having jurisdiction in the case, the date of conviction or other disposition, and the disposition of the offense.

Has the applicant or any of the Organization's officers, directors, or trustees, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or has been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any crime involving fraud, theft, larceny, embezzlement, fraudulent conversion, or misappropriation of property, within the last 10 years? Yes No If yes, provide the name of such person, the nature of the offense, the date of the offense, the court having jurisdiction in the case, the date of conviction or other disposition, and the disposition of the offense.

Has the applicant or any of the Organization's officers, directors, or trustees, been enjoined from violating any law relating to a charitable solicitation? Yes No If yes, provide the name of such person, the date of the injunction, and the court issuing the injunction.



**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 purposes as indicated on Pages 2 through 6 of this application. I further certify that any funds received shall be used prudently and in such a manner as to avoid any appearance of extravagance, waste, or impropriety. I certify that the responses provided in this application are true and correct to the best of my knowledge and understand that any omissions, untruthfulness, or misrepresentations contained herein shall disqualify the Organization from further consideration or may result in revocation and/or reimbursement of awarded LETF funds. Additionally, I certify that the organization requesting the funds is either (a) a governmental agency, (b) a Florida not-for-profit 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, or (c) a Non-Florida not-for-profit 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, Department, Division (Not-for-profit organizations with headquarters outside of Florida)

Scott Scrivner

Name (please print)
Scott Scrivner

Signature

Director

Title (please print)
12/22/2017

Date

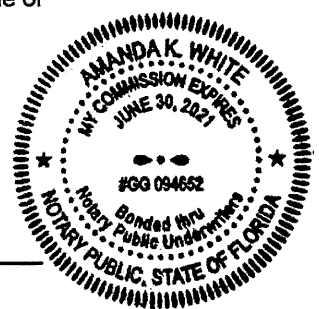
NOTARY SECTION:
State of Florida
County of Palm Beach

The foregoing Agreement was acknowledged and subscribed before me this 22nd day of December 20 17 by Scott Scrivner (name of individual) as Director (title) of PBC PAL (name of organization/ agency), who is personally known to me or who produced _____ as identification.

awhite

Notary Public

My Commission Expires: 6-30-21





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

Attachment A

APPLICATION

Organization Name: Palm Beach County Sheriff's Foundation - Explorers

FEID #: 27-2615023

Web Address: PBCSHERIFFSFUNDATION.COM

Address: 3228 Gun Club Road
STREET ADDRESS

West palm Beach, Fl. 33406
CITY, STATE, ZIP

Executive Director: Richard Seymour

NAME

SIGNATURE

561-371-9381 ricks@csipalmbeach.com

TELEPHONE NUMBER E-MAIL ADDRESS

Fiscal Agent:

NAME

SIGNATURE

TELEPHONE NUMBER E-MAIL ADDRESS

Date: 1/9/2018

DATE



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

Attachment A

Organization Name: Palm Beach County Sheriff's Foundation - Explorers

LETTF Funding Request (**MUST match total on Financial Application**): \$25,000.00

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

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

Organization Purpose:

Our mission and purpose is to facilitate the development of productive citizens through hands on training. To provide organized and supervised recreation and education programs under the leadership of law enforcement to help establish positive relationship between youth and their communities.

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

- 1) Disney Education Series and camping teaches team work and life skills. Youth will learn to work together as a team putting their skills to the test.
- 2) Winterfest is held in Gatlinburg Tennessee and sponsored by the Boy Scouts of America for the Explorers and is an exciting weekend of competition and activities unmatched by any other event in the United States!

What results are you committed to achieving?

In today's society our young adults face gangs, drugs, bullying, and social networking in their daily lives. The manifestation of street violence that has encroached on our communities and the presence of gangs more than double's the likelihood of violent victimization. Our program provides these youths with the necessary resources to resist violence, strategies to prevent them from being a victim and provide conflict resolution skills. We enable these youth with positive reinforcement as well as positive role models in which to associate with. The Explorers are given the opportunities to further their education through scholarships, participate in rewarding and productive community service activities, and enhance preparation for future roles as community members.



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

Attachment A

FINANCIAL APPLICATION

Period Covered (one year) From: July 1, 2018 To: June 30, 2019

No.	Expense	Program Total	LETF Request	LETF
1.	Salaries			0.00%
2.	Employee Benefits/Payroll Taxes			0.00%
3.	Professional Fees			0.00%
4.	Occupancy/Utilities			0.00%
5.	Telephone			0.00%
6.	Postage/Shipping			0.00%
7.	Printing & Publications			0.00%
8.	Supplies			0.00%
9.	Travel	\$4,560.00	\$4,500.00	98.68%
10.	Meetings	\$14,661.72	\$13,000.00	88.67%
11.	Miscellaneous Expenses	\$7,794.36	\$7,500.00	96.22%
	Total Expenses	\$27,016.08	\$25,000.00	92.54%



**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):

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):

Lodging for Winterfest Competition for 36 Explorers 12 rooms @\$95.00 per night X 4nights = \$4,560.00

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

Winterfest competition fees for 36 Explorers @ \$45.00 X 36 Explorers = \$1,620.00

Disney youth Education Series Leadership and teamwork summer course; The evolution of technology class with a three day park hopper pass. We are requesting funding for 3 Explorer Posts, 45 Explorers and 6 Advisors; \$255.72 each. Total 51 X \$255.72 = 13,041.72

Miscellaneous Expense (specify items):

Meals and Lodging not included in conference and training fees.

Disney Lodging / camping fees for 4 nights, 45 youth and 6 Advisors; Total \$2,520.00

Meals for Disney Leadership \$14.09 X 51 Participants X 4 days = Total 2,874.36

Meals for Winterfest 4 days X 30 Explorers X 20.00 per day = Total \$2,400.00



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

Attachment A

Disclosure re: Organization's background:

Has the applicant or any of the Organization's officers, directors, trustees, or principal salaried executive personnel been enjoined in any jurisdiction from soliciting contributions or have been found to have engaged in unlawful practices in the solicitation of contributions or administration of charitable assets? Yes No If Yes, please provide the details

Has the Organization had its registration or authority denied, suspended, or revoked by any governmental agency? Yes No If yes, please provide the reasons for such denial, suspension, or revocation

Has the applicant or any of the Organization's officers, directors, or trustees, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony within the last 10 years? Yes No If yes, provide the name of such person, the nature of the offense, the date of the offense, the court having jurisdiction in the case, the date of conviction or other disposition, and the disposition of the offense.

Has the applicant or any of the Organization's officers, directors, or trustees, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or has been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any crime involving fraud, theft, larceny, embezzlement, fraudulent conversion, or misappropriation of property, within the last 10 years? Yes No If yes, provide the name of such person, the nature of the offense, the date of the offense, the court having jurisdiction in the case, the date of conviction or other disposition, and the disposition of the offense.

Has the applicant or any of the Organization's officers, directors, or trustees, been enjoined from violating any law relating to a charitable solicitation? Yes No If yes, provide the name of such person, the date of the injunction, and the court issuing the injunction.



**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 purposes as indicated on Pages 2 through 6 of this application. I further certify that any funds received shall be used prudently and in such a manner as to avoid any appearance of extravagance, waste, or impropriety. I certify that the responses provided in this application are true and correct to the best of my knowledge and understand that any omissions, untruthfulness, or misrepresentations contained herein shall disqualify the Organization from further consideration or may result in revocation and/or reimbursement of awarded LETF funds. Additionally, I certify that the organization requesting the funds is either (a) a governmental agency, (b) a Florida not-for-profit 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, or (c) a Non-Florida not-for-profit 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

PALM BEACH COUNTY SHERIFF'S FOUNDATION
State, Department, Division (Not-for-profit organizations with headquarters outside of Florida)

RICHARD J SEYMOUR
Name (please print)

BOARD CHAIRMAN
Title (please print)

[Signature]
Signature

1/9/2018
Date

NOTARY SECTION:

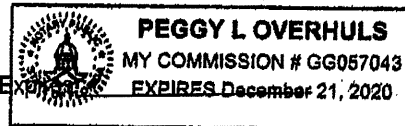
State of Florida
County of Palm Beach

The foregoing Agreement was acknowledged and subscribed before me this 10th day of

January, 2018 by RICHARD SEYMOUR (name of individual) as Board Chairman (title) of Palm Beach County Sheriff's office (name of

organization/ agency), who is personally known to me or who produced _____ as identification.

Peggy L Overhuls
Notary Public





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

Attachment A

APPLICATION

Organization Name: PALM BEACH COUNTY SHERIFF'S FOUNDATION

FEID #: 27-2615023

Web Address: WWW.PBCSF.ORG

Address: 3228 GUN CLUB ROAD

STREET ADDRESS

WEST PALM BEACH, FL 33406

CITY, STATE, ZIP

Executive Director: Mr. Richard Seymour

NAME

SIGNATURE

561-371-9381

ricks@csipalmbeach.com

TELEPHONE NUMBER

E-MAIL ADDRESS

Fiscal Agent:

NAME

SIGNATURE

TELEPHONE NUMBER

E-MAIL ADDRESS

Date:

DATE



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

Attachment A

Organization Name: PALM BEACH COUNTY SHERIFF'S FOUNDATION

LETF Funding Request (MUST match total on Financial Application): \$25,000.00

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

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

Organization Purpose:

To provide organized and supervised recreation and educational programs under the leadership of law enforcement to help establish a positive relationship between youth and their communities.

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

Funded items will include a backpack, an age appropriate educational kit which contains most of the supplies required per school lists. We are utilizing our community policing deputies to identify the families in need of school supplies. In addition we are providing necessary school supplies to our adopted school centers and will be identifying schools who have 90% free and reduced lunch population for assistance with supplies, this information is provided to us from the school board. We will distribute crime prevention pamphlets about anti-bullying, computer safety for the students and parents as well as 211 informational cards.

What results are you committed to achieving?

These efforts are geared towards starting a child off with the necessary tools to have a successful learning experience, and to be on the same playing field as other students who are supported financially by their families. As well as to inspire the rapport with deputies who assist with the distribution of supplies.



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

Attachment A

FINANCIAL APPLICATION

Period Covered (one year) From: July 1, 2018 To: June 30, 2019

No.	Expense	Program Total	LETF Request	LETF
1.	Salaries			0.00%
2.	Employee Benefits/Payroll Taxes			0.00%
3.	Professional Fees			0.00%
4.	Occupancy/Utilities			0.00%
5.	Telephone			0.00%
6.	Postage/Shipping			0.00%
7.	Printing & Publications			0.00%
8.	Supplies	\$42,250.00	\$25,000.00	59.17%
9.	Travel			0.00%
10.	Meetings			0.00%
11.	Miscellaneous Expenses			0.00%
	Total Expenses	\$42,250.00	\$25,000.00	59.17%



**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):

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):

2287 school kits
1100 printed series backpacks w/k-2nd @\$12.75= \$14,025.00
1000 W/ elementary school elementary @\$13.00= \$13,000.00
187 W/ Middle/high school @ \$15.96 = \$2,984.52

Grand total \$30,000

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

Disclosure re: Organization's background:

Has the applicant or any of the Organization's officers, directors, trustees, or principal salaried executive personnel been enjoined in any jurisdiction from soliciting contributions or have been found to have engaged in unlawful practices in the solicitation of contributions or administration of charitable assets? Yes No If Yes, please provide the details

Has the Organization had its registration or authority denied, suspended, or revoked by any governmental agency? Yes No If yes, please provide the reasons for such denial, suspension, or revocation

Has the applicant or any of the Organization's officers, directors, or trustees, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any felony within the last 10 years? Yes No If yes, provide the name of such person, the nature of the offense, the date of the offense, the court having jurisdiction in the case, the date of conviction or other disposition, and the disposition of the offense.

Has the applicant or any of the Organization's officers, directors, or trustees, regardless of adjudication, been convicted of, or found guilty of, or pled guilty or nolo contendere to, or has been incarcerated within the last 10 years as a result of having previously been convicted of, or found guilty of, or pled guilty or nolo contendere to, any crime involving fraud, theft, larceny, embezzlement, fraudulent conversion, or misappropriation of property, within the last 10 years? Yes No If yes, provide the name of such person, the nature of the offense, the date of the offense, the court having jurisdiction in the case, the date of conviction or other disposition, and the disposition of the offense.

Has the applicant or any of the Organization's officers, directors, or trustees, been enjoined from violating any law relating to a charitable solicitation? Yes No If yes, provide the name of such person, the date of the injunction, and the court issuing the injunction.



**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 purposes as indicated on Pages 2 through 6 of this application. I further certify that any funds received shall be used prudently and in such a manner as to avoid any appearance of extravagance, waste, or impropriety. I certify that the responses provided in this application are true and correct to the best of my knowledge and understand that any omissions, untruthfulness, or misrepresentations contained herein shall disqualify the Organization from further consideration or may result in revocation and/or reimbursement of awarded LETF funds. Additionally, I certify that the organization requesting the funds is either (a) a governmental agency, (b) a Florida not-for-profit 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, or (c) a Non-Florida not-for-profit 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

Palm Beach County Sheriff's Foundation

State, Department, Division (Not-for-profit organizations with headquarters outside of Florida)

RICHARD J SEYMOUR
Name (please print)

Board Chairman

Title (please print)

[Signature]
Signature

12/10/2017
Date

NOTARY SECTION:

State of Florida

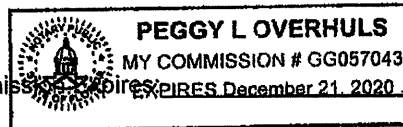
County of Palm Beach

The foregoing Agreement was acknowledged and subscribed before me this 18th day of

December, 2017 by RICHARD J SEYMOUR (name of individual) as Board Chairman (title) of Palm Beach County Sheriff's Office (name of organization/ agency), who is personally known to me or who produced _____ as identification.

[Signature]
Notary Public

My Commission Expires





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

Attachment A

APPLICATION

Organization Name: Florida Sheriffs Association

FEID #: 59-0708112

Web Address: www.flsheriffs.org

Address: 2617 Mahan Drive
STREET ADDRESS
Tallahassee, FL 32308
CITY, STATE, ZIP

Executive Director: Steve Casey
NAME
Steve Casey
SIGNATURE
850-877-2165 scasey@flsheriffs.org
TELEPHONE NUMBER E-MAIL ADDRESS

Fiscal Agent: Trish Eldridge
NAME
P. Eldridge
SIGNATURE
850-877-2165 tledridge@flsheriffs.org
TELEPHONE NUMBER E-MAIL ADDRESS

Date: 7/31/18
DATE



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

Attachment A

Organization Name: Florida Sheriffs Association

LETF Funding Request (MUST match total on Financial Application): \$50,000.00

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

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

*Other: See next page

Organization Purpose:

The purpose of the Florida Sheriffs Association is to provide effective and timely support, training and information exchanges for Florida's sheriffs and to foster effective law enforcement, crime prevention, apprehension of criminals and protection of life and property of the citizens of Florida.

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

The Cold Case Advisory Commission (CCAC) was formed by the FSA in 2015 and is an inter-disciplinary approach for the receipt and review of unresolved murder and missing person with foul play suspected case investigative and evidence information as well as unresolved human remains cases. The CCAC is comprised of subject matter experts who review the case information which is presented by case investigators from the submitting agency and offers investigative advice based upon their expertise and newly emerging scientific technology. The CCAC process provides a fresh and technology advanced perspective at the existing evidence and information. Any Florida law enforcement agency may submit a case for review after the sheriff of jurisdiction where the incident occurred approves the case for review. Under certain circumstances, the CCAC will not only offer advice but also provide personnel resources to assist the case investigator.

What results are you committed to achieving?

The CCAC is committed to providing knowledge and resources to investigate and support the efforts of law enforcement to solve these cases and providing information and support to family members of the victim(s). It is our goal to increase the solvability rate and/or investigation of these cases.



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

Attachment A

*Supplement to Attachment A (continued after Page 3)

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

Other:

These funds will be used as outlined within Florida State Statute (FSS) 932.7055 (5)(c)(1) as "other law enforcement purposes" to address the under met need of Florida law enforcement to Investigate unresolved murder and missing persons cases in which foul play is suspected, often referred to as "cold cases". A survey* of Florida sheriffs conducted by the Florida Sheriffs Association (FSA) in 2017 reflected that as a very conservative estimate there are 5000 estimated unsolved murders and/or missing persons cases in which foul play is suspected.

In addition, the funds will be used to assist with the identification of unidentified human remains.

*Note: This was a point in time survey in which there were 31 agencies who responded and 16 who skipped this survey and therefore is not scientific.



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

Attachment A

FINANCIAL APPLICATION

Period Covered (one year) From: October 1, 2018 To: September 30, 2019

No.	Expense	Program Total	LETF Request	LETF
1.	Salaries			0.00%
2.	Employee Benefits/Payroll Taxes			0.00%
3.	Professional Fees		\$31,000.00	0.00%
4.	Occupancy/Utilities			0.00%
5.	Telephone			0.00%
6.	Postage/Shipping		\$200.00	0.00%
7.	Printing & Publications		\$350.00	0.00%
8.	Supplies		\$250.00	0.00%
9.	Travel		\$15,000.00	0.00%
10.	Meetings		\$200.00	0.00%
11.	Miscellaneous Expenses		\$3,000.00	0.00%
	Total Expenses	\$0.00	\$50,000.00	0.00%



**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):

N/A

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

- DNA testing/analysis at private labs for analysis which may not be able to be performed at the state lab(s) due to need for specialized information and techniques, including genealogy, and/or limitation regarding timely response;
- Specialized forensic assistance, consultation, technical assistance, and/or analysis to include, but not limited to: Isotope, blood splatter, fingerprint, skeletal, hair, wound, handwriting, digital other scientific or technical expertise;
- Expert testimony and/or consultation related to case investigation and/or prosecution;
- Technical and/or equipment assistance and/or expertise related, but not limited to:
 - Searches at scene(s) and/or dig-site(s) to include but not limited to canine(s), excavation equipment as well as records, digital, devices, etc.; Reconstruction: facial, scene or other needed reconstruction; Exhumation related; Other equipment/expertise which may become available with scientific advances

Occupancy/Utilities (list utilities):

N/A

Telephone (provide telephone numbers):

N/A

Printing & Publications (list type of material):

For CCAC informational brochures, publications, posters, displays or other printed material need for case investigations/prosecution and/or CCAC meetings.



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

Attachment A

Supplies (list supplies/equipment):

Miscellaneous supplies needed to accomplish the mission of the CCAC.

Postage/Shipping: Related to materials including evidentiary items related to case investigation/prosecution and/or Cold Case Advisory Commission (CCAC) meetings.

Travel (individuals traveling, destination and purpose):

Related to case investigation/prosecution to include scientific, technical experts and/or personnel assigned to assist with locating persons with knowledge and/or suspects. Related to CCAC members assigned to assist Florida sheriffs with the review of case information including evidence and/or to establish/enhance Cold Case Units.

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

Reference material and/or supplies needed for quarterly CCAC meetings.

Miscellaneous Expense (specify items):

Unexpected and/or unanticipated expenses associated with accomplishing the CCAC mission.



**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 purposes as indicated on Pages 2 through 5 of this application. I certify that the responses provided in this application are true and correct to the best of my knowledge.

Sadie Darnell
Name (please print)

Sheriff
Title (please print)

Sadie Darnell
Signature

8/2/2018
Date

NOTARY SECTION:

State of Florida
County of Alachua

The foregoing Agreement was acknowledged and subscribed before me this 2 day of August, 2018 by Sadie Darnell (name of individual) as Sheriff (title) of Alachua County Sheriff's Office (name of organization/ agency), who is personally known to me or who produced _____ as identification.



Laura Compton
Notary Public

My Commission Expires: _____