

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS**

## AGENDA ITEM SUMMARY

**Meeting Date:** November 2, 2021      **( X ) Consent**      **(   ) Regular**  
    **(   ) Workshop**      **(   ) Public Hearing**

**Submitted By: Clerk of the Circuit Court & Comptroller, Palm Beach County**

**Submitted For: Joseph Abruzzo, Clerk of the Circuit Court & Comptroller**

## **I. EXECUTIVE BRIEF**

**Motion and Title:**

**Staff recommends motion to approve** the following final minutes of the Board of County Commissioners' meetings:

| <u>Meeting Date</u> | <u>Meeting Type</u> |
|---------------------|---------------------|
| July 22, 2021       | Zoning              |
| July 28, 2021       | Comprehensive Plan  |
| September 29, 2021  | Zoning              |

### Background and Justification:

The minutes of the Board of County Commissioners' (BCC) meetings had been previously distributed by e-mail to each commissioner's office for review. These minutes are being submitted for approval for inclusion in the official records in the Clerk and Comptroller's office in accordance with Section 286.011(2), Florida Statutes, and the BCC Rules and Procedure R2013-0109, Section II-K.

**Attachments:**

The minutes are available for inspection in the Clerk of the Circuit Court & Comptroller's Board Services office, Room 203.2, 2nd Floor, Weisman Governmental Center, at 301 N. Olive Avenue.

Recommended by: Michael Florio 10/14/21  
Michael Florio, Manager - Finance Services Date

Approved by: N/A  
Assistant County Administrator Date

II. FISCAL IMPACT ANALYSIS

A. Five-Year Summary of Fiscal Impact:

| <u>Fiscal Years</u>                             | <u>2021</u>      | <u>2022</u> | <u>2023</u> | <u>2024</u> | <u>2025</u> |
|---|------------------|-------------|-------------|-------------|-------------|
| Capital Expenditures                            | _____            | _____       | _____       | _____       | _____       |
| Operating Costs                                 | _____            | _____       | _____       | _____       | _____       |
| External Revenues                               | _____            | _____       | _____       | _____       | _____       |
| Program Income (County)                         | _____            | _____       | _____       | _____       | _____       |
| In-Kind Match (County)                          | _____            | _____       | _____       | _____       | _____       |
| NET FISCAL IMPACT                               | _____            | _____       | _____       | _____       | _____       |
| Number of additional FTE positions (Cumulative) | _____            | _____       | _____       | _____       | _____       |
| Is item included in Current Budget?             | Yes_____ No_____ |             |             |             |             |

Budget Account No.: Fund\_\_\_\_\_ Agency\_\_\_\_\_ Org.\_\_\_\_\_ Object\_\_\_\_\_

Reporting Category\_\_\_\_\_

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

C. Departmental Fiscal Review:

III. REVIEW COMMENTS

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

|       |                           |
|-------|---------------------------|
| _____ | _____                     |
| OFMB  | Contract Dev. and Control |

B. Legal Sufficiency:

\_\_\_\_\_

Assistant County Attorney

C. Other Department Review:

\_\_\_\_\_

Department Director