PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS AGENDA ITEM SUMMARY

Meeting Date: April 5, 2022	[x]	Consent	[]	Regular	
Danastonanti	[]	Ordinance	[]	Public Hearing	
Department: Submitted By: Palm Beach Co Submitted For: Palm Beach Co					
I.	EXEC	CUTIVE BRIEF			
Motion and Title: Staff recommend County Sheriff's Office, a donation of the amount of \$4,201.01; and B) App Grant Fund.	rom the	e Great American Life	Insu	rance Company in	
Summary: On January 25, 2022, the check in the amount of \$4,201.01 a Great American Life Insurance Police welfare organization 501(c)(4). The donation. Countywide (LDC)	s the d	lesignated beneficiary e donation will be tran	in a sferre	former employee's ed to the employee	
Background and Justification: Great American Life Insurance Company provides life insurance policies for individuals. The Palm Beach County Sheriff's Office was designated as a beneficiary through a former employee's insurance policy.					
Attachments:					
Budget Amendment Great American Life Insur	rance L	_etter			
RECOMMENDED BY:	NT DIF	RECTOR		3/10/2022 DATE	
APPROVED BY: COUNTY AE	BUL DMINIS	STRATOR		3/23/22 DATE	

II. FISCAL IMPACT ANALYSIS

Five Year Summary of Fiscal Impact: A. 2022 2023 2024 2025 2026 Fiscal Years Capital Expenditures \$4,202 **Operating Costs** (\$4,202)External Revenues Program Income (County) In-Kind Match (County) 0 Net Fiscal Impact 0 # Additional FTE 0 **Positions** (Cumulative) YES _____ NO __X Is Item Included in Current Budget: Budget Account No.: Fund 1152 Agency 160 Org 2420 Object 6600 Reporting Category ___ В. Recommended Sources of Funds / Summary of Fiscal Impact: Pass-through donation received from the Great American Life Insurance Co. There is no match requirement associated with this donation. Great American Life Insurance Donation-FY22 **\$4,202** Total Program Budget **REVIEW COMMENTS** OFMB Fiscal and/or Contract Administration Comments: Α. Contract Administration Legal Sufficienc B. **Attorney** C. Other Department Review: Department Director

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

22-0596

BOARD OF COUNTY COMMISSIONERS PALM BEACH COUNTY, FLORIDA **BUDGET AMENDMENT**

FUND 1152 - Sheriff's Grants Fund

Page 1 of 1

BGEV 031422 × 1042 BGIEV 031422 × 432

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

		ORIGINAL	CURRENT			ADJUSTED		REMAINING
ACCT.NUMBER	ACCOUNT NAME	BUDGET	BUDGET	INCREASE	DECREASE	BUDGET	ENCUMBERED	BALANCE
Revenues								
One of American Life Inc	ouranae Ca EVO2							
Great American Life Ins 160-2420-6600	Surance Co F 122 Contribution/Donation Fr Private Sources	0	0	4,202	0	4,202		
100-2420-0000	Contribution/Donation (1) Filivate Sources	U	U	4,202	U	4,202		
	TOTAL REVENUES	10,333,029	\$10,112,825	\$4,202	\$0	10,117,027	•	
							•	
<u>Expenditures</u>								
Great American Life Ins	surance Co EV22							
160-2420-9498	Transfer to Sheriff's Fund 1902	0	0	4,202	0	4,202		
100 2 120 0 100	Transfer to energy and reez	Ū	J	1,202	J	,,202		
	TOTAL EXPENDITURES	10,333,029	\$10,112,825	\$4,202	\$0	10,117,027		
		,	1					
Dalma Dalash Oassaks Ob	auissa Ostina	Signatures		Date			By Board of County C	
Palm Beach County Sh	епіт s Опісе	1		. 1			At Meeting of April 5,	, 2022
		1/	•		. 2 5			
INITIATING DEPARTM	MENT/DIVISION	/K		3/10/2	000			
		00 0		1 1			Deputy Clerk to the	
Administration/Budget Department Approval		You anth	XXX an Kaux		3/14/22		Board of County Commissioners	
,								
		V						
OFMB Department - P	osted							

Great American Life Insurance Company PO Box 5420 Cincinnati, OH 45201-5420 Check Number: 00052624747
Check Amount: \$4,201.01

GREATAMERICAN.
LIFE INSURANCE CO.

O MossMutud company

Palm Beach County Sheriff's Office 3228 Gun Club Road West Palm Beach, FL 33406

January 25, 2022 Re: Contract Number 05533432

Amber Victoria Horvath # 5136 Bates = EE last name retrad 1/5/2016

Dear Palm Beach County Sheriff's Office:

Why am I receiving this letter?

We processed your request for a lump sum distribution of the death benefit on the contract number above.

Enclosed, please find a check representing the death benefit payment. This amount was calculated as follows:

 Death Benefit: 	\$4,197.85
 Additional Interest: 	\$3.16
 Federal income tax withheld: 	\$0.00
 State income tax withheld: 	\$0.00
 Total amount payable: 	\$4,201.01

The taxable amount that is reportable to the IRS under the beneficiary's federal tax identification number is \$4,201.01.

What do I need to do?

This payment closes your claim. No action is required. Please note, because this claim has already been processed your money cannot be returned to us and we cannot reverse this transaction. Please be sure to cash or deposit this check within 90 days.

What if I have questions?

Our Customer Service representatives are here to help. Call 800-854-3649 for assistance.

All the best,

RIPHLIAMIN

Rebecca Hoff, MBA, FLMI, FSRI, ARA, ACS, AIRC

Life & Annuity Claims Department

Great American Life Insurance Company

PALM BEACH COUNTY SHERIFF'S OF 3228 GUN CLUB RD WEST PALM BEACH, FL 33406

CHECK NUMBER CHECK DATE PAYEE CODE

0052624747 01/26/22 PALM BEACH COUN

 Date
 Reference

 01/25/22
 250122189227281

Death Clear

Description
Death Claim Pay

Amount

4,201.01

05533432

Great American Life Insurance Company PO Box 5420

Cincinnati OH 45201-5420

PNC Bank 070

56-389 412 Void After 180 Days 0052624747

01/26/22

FOUR THOUSAND TWO HUNDRED ONE DOLLARS & 01/100

\$*****4,201.01

Security features included, Details on back.

PALM BEACH COUNTY SHERIFF'S OFFICE 3228 GUN CLUB RD WEST PALM BEACH, FL 33406

Christopher P. Miliano

#OO52624747# #O41203895# 4239723049#