



Meeting Agenda Item Coversheet

MEETING DATE:		11/30/2020	Submitted By: Administration		
SUBJECT: <i>This will be the name of the Item as it will appear on the Agenda</i>		Palm Beach County Municipal Cares Act Reimbursement Program			
STAFF RECOMMENDATION: (MOTION READY)		Motion Authorizing the City Manager to enter into an Interlocal Agreement with Palm Beach for City reimbursement of COVID-19 related expenditures			
SUMMARY and/or JUSTIFICATION:		<p>Funds are eligible through Palm Beach County Municipal Cares Reimbursement Program for municipalities that have procured or made certain expenditures related to COVID-19 that occurred between March 1, 2020 through October 31, 2020.</p> <p>All requests for funding must be submitted with appropriate back up documentation to Palm Beach County no later than December 1.</p>			
SELECT, if applicable		AGREEMENT:	<input checked="" type="checkbox"/>	BUDGET:	<input type="checkbox"/>
		STAFF REPORT:	<input type="checkbox"/>	PROCLAMATION:	<input type="checkbox"/>
		EXHIBIT(S):	<input type="checkbox"/>	OTHER:	<input checked="" type="checkbox"/>
IDENTIFY EACH ATTACHMENT. <i>For example, an agreement may have 2 exhibits, identify the agreement and Exhibit A and Exhibit B</i>		Palm Beach County Municipal Cares Act Reimbursement Program Palm Beach County Municipal Cares Act Reimbursement Agreement			
SELECT, if applicable		RESOLUTION:	<input type="checkbox"/>	ORDINANCE:	<input type="checkbox"/>
IDENTIFY FULL RESOLUTION OR ORDINANCE TITLE <i>(if Item is not a Resolution or Ordinance, please erase all default text from this field's textbox and leave blank) Please keep text indented.</i>		<Enter Short Resolution/Ordinance Title Here> <ENTER FULL RESOLUTION/ORDINANCE TITLE HERE>			
FISCAL IMPACT (if any):				\$	