# **CITY OF PAHOKEE**



## **AGENDA**

City Commission Regular Meeting
Tuesday, September 23, 2025, at 6:00 PM

Pahokee Commission Chambers 360 East Main Street Pahokee, Florida 33476

#### **CITY COMMISSION:**

Mayor Keith W. Babb, Jr.
Vice Mayor Sanquetta Cowan-Williams
Commissioner Isabelle J. McDonald
Commissioner Everett D. McPherson, Sr.
Commissioner James H. Scott

#### **CHARTER OFFICERS:**

Michael E. Jackson, City Manager Nylene Clarke, City Clerk Burnadette Norris-Weeks, P.A., City Attorney

[TENTATIVE: SUBJECT TO REVISION]

#### **AGENDA**

- A. CALL TO ORDER
- B. INVOCATION AND PLEDGE OF ALLEGIANCE
- C. ROLL CALL
- D. ADDITIONS OF EMERGENCY BASIS FROM CITY MANAGER, DELETIONS AND APPROVAL OF AGENDA ITEMS
- E. PRESENTATIONS / PROCLAMATIONS / PUBLIC SERVICE ANNOUNCEMENTS / PUBLIC COMMENTS (agenda items only)

(This section of the agenda allows for comments from the public to speak. Each speaker will be given a total of three (3) minutes to comment. A public comment card should be completed and returned to the City Clerk. When you are called to speak, please go to the podium or unmute your device, and prior to addressing the Commission, state your name and address for the record)

- 1. Proclamation Proclaiming September 2025 as Hunger Action Month
- F. CONSENT AGENDA
- **G. OLD BUSINESS** (discussion of existing activities or previously held events, if any)
- H. PUBLIC HEARINGS AND/OR ORDINANCES
  - 1. RESOLUTION 2025-54 A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, ADOPTING A FINAL MILLAGE FOR THE FISCAL YEAR COMMENCING OCTOBER 1, 2025, THROUGH SEPTEMBER 30, 2026, PURSUANT TO SECTION 200.065, FLORIDA STATUTES; COMPUTING THE ROLLED-BACK RATE; PROVIDING FOR THE ADOPTION OF REPRESENTATIONS; PROVIDING FORWARDING INSTRUCTIONS; PROVIDING FOR AN EFFECTIVE DATE.
  - 2. RESOLUTION 2025-55 A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA RELATING TO FINANCES, PROVIDING FOR THE ADOPTION AND FUNDING OF THE FINAL MUNICIPAL BUDGET OF THE CITY OF PAHOKEE, FLORIDA IN THE AMOUNT OF \$7,627,990.00, FOR THE FISCAL YEAR BEGINNING OCTOBER 1, 2025, AND ENDING SEPTEMBER 30, 2026; PROVIDING FOR ADOPTION OF REPRESENTATIONS; PROVIDING FOR AN EFFECTIVE DATE.
  - 3. ORDINANCE 2025-01 (SECOND READING) AN ORDINANCE OF THE CITY OF PAHOKEE, FLORIDA; PROVIDING FOR THE CITY'S CONSENT TO THE INCLUSION OF THE ENTIRE TERRITORY WITHIN THE CITY OF PAHOKEE'S MUNICIPAL BOUNDARIES INTO PALM BEACH COUNTY'S FIRE/RESCUE MUNICIPAL SERVICE TAXING UNIT FOR FIRE-RESCUE, FIRE PROTECTION, ADVANCED LIFE SUPPORT (OR SIMILAR EMERGENCY SERVICES), FIRE CODE ENFORCEMENT AND OTHER NECESSARY AND INCIDENTAL SERVICES; PROVIDING FOR INCORPORATION; PROVIDING FOR INTENT, PURPOSE AND CONSENT; PROVIDING FOR EFFECTIVENESS AND DURATION OF CONSENT; PROVIDING FOR EFFECTIVENESS OF REPEAL; ACKNOWLEDGING AD VALOREM MILLAGE RATE LIMITATION; PROVIDING FOR REPEAL OF CONFLICTING ORDINANCES; PROVIDING FOR SEVERABILITY; PROVIDING FOR CODIFICATION; PROVIDING FOR CAPTIONS; AND PROVIDING FOR EFFECTIVE DATE.

I. RESOLUTION(S)

- 1. RESOLUTION 2025-56 A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA APPROVING THE OBSERVED HOLIDAYS FOR FISCAL YEAR 2025/2026, AS SET FORTH ON EXHIBIT "A"; PROVIDING FOR ADOPTION OF REPRESENTATIONS; PROVIDING FOR AN EFFECTIVE DATE.
- 2. RESOLUTION 2025-57 A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, AUTHORIZING THE MAYOR TO EXECUTE THE TWENTIETH ADDENDUM TO THE LAW ENFORCEMENT SERVICE AGREEMENT BETWEEN THE CITY OF PAHOKEE AND RICK L. BRADSHAW, SHERIFF OF PALM BEACH COUNTY, FLORIDA, ATTACHED HERETO AS EXHIBIT "A"; PROVIDING FOR ADOPTION OF REPRESENTATIONS; PROVIDING FOR AN EFFECTIVE DATE.
- 3. RESOLUTION 2025-58 A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, APPROVING THE ACCEPTANCE OF THE GENERAL LIABILITY, PROPERTY & CASUALTY COVERAGES, AUTO LIABILITY AND WORKERS COMPENSATION PACKAGE SET FORTH IN EXHIBIT "A" HERETO; AUTHORIZING THE CITY MANAGER TO TAKE NECESSARY ACTION; PROVIDING FOR ADOPTION OF REPRESENTATIONS; PROVIDING FOR AN EFFECTIVE DATE.
- 4. RESOLUTION 2025-59 A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, APPROVING THE ACCEPTANCE OF THE EMPLOYEE BENEFITS PACKAGE WITH A 9.1% INCREASE IN MEDICAL COVERAGE AND A 11.6% INCREASE IN DENTAL INSURANCE COVERAGE, AS SET FORTH IN EXHIBIT "A" HERETO; AUTHORIZING THE CITY MANAGER TO TAKE NECESSARY ACTION; PROVIDING FOR ADOPTION OF REPRESENTATIONS; PROVIDING FOR AN EFFECTIVE DATE.
- 5. RESOLUTION 2025-60 A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, APPROVING THE PAHOKEE MIDDLE/SENIOR HIGH SCHOOL 2025 HOMECOMING PARADE AND AUTHORIZING AN APPLICATION FOR A PARADE PERMIT FROM THE FLORIDA DEPARTMENT OF TRANSPORTATION; PROVIDING FOR ADOPTION OF REPRESENTATIONS; PROVIDING FOR AN EFFECTIVE DATE.
- 6. RESOLUTION 2025-61 A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, CONFIRMING THE CITY OF PAHOKEE'S HOSTING OF THE INAUGURAL PAHOKEE HIGH SCHOOL ALUMNI PICNIC; RATIFYING PARTICIPATION WITH THE PLANNING OF THE EVENT; APPROVING FEES FOR THE EVENT; AUTHORIZING USE OF COLLECTED FUNDS TO OFF-SET EXPENSES; AUTHORIZING AN EXPENDITURE OF UP TO \$1,500.00 FOR INCIDENTALS; AUTORIZING THE CITY MANAGER TO TAKE ALL NECESSARY STEP TO CARRY OUT THE EVENT INTENT; PROVIDING FOR SEVERABILITY; PROVIDING FOR ADOPTION OF REPRESENTATIONS; PROVIDING FOR AN EFFECTIVE DATE.
- **J. NEW BUSINESS** (presentation by city manager of activity or upcoming event, if any)
- K. REPORT OF THE MAYOR
- L. REPORT OF THE CITY MANAGER
  - 1. Update City Projects
- M. REPORT OF THE CITY ATTORNEY
- N. FUTURE AGENDA ITEMS OF COMMISSIONERS, IF ANY
- O. GENERAL PUBLIC COMMENTS (items not on the agenda)

- P. COMMISSIONER COMMENTS AND FOR THE GOOD OF THE ORDER (community events, feel good announcements, if any)
- Q. ADJOURN

Any citizen of the audience wishing to appear before the City Commission to speak with reference to any agenda or non-agenda item must complete the "Request for Appearance and Comment" form and present completed form to the City Clerk prior to commencement of the meeting.

Should any person seek to appeal any decision made by the City Commission with respect to any matter considered at this meeting, such person will need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based. (Reference: Florida Statutes 286.0105)

In accordance with the provisions of the Americans with Disabilities Act (ADA), this document can be made available in an alternate format upon request. Special accommodations can be provided upon request with three (3) days advance notice of any meeting, by contacting the Office of the City Clerk at 561-924-5534. If hearing impaired, contact Florida Relay at 800-955-8771 (TDD) or 800-955-8770 (Voice), for assistance. (Reference: Florida Statutes 286.26)

#### **PROCLAMATION**

**WHEREAS**, United Way of Palm Beach County and the Palm Beach County Board of County Commissioners joined forces in 2015, launching a bold, countywide Hunger Relief Plan that continues to address food insecurity and its lasting impact on individuals and families; and

**WHEREAS**, the Hunger Relief Plan is guided by 10 ambitious goals and driven by the collective impact efforts of 183 partner organizations and a dedicated Hunger Relief Advisory Council; and

**WHEREAS**, overall food insecurity decreased from 14.2% in 2015 to 11.5% in 2024, and child hunger declined from 23.6% to 18.1%; and

**WHEREAS**, over the past decade, partners have worked closely to increase food security through vital programs, such as the Afterschool Meals Program, Summer BreakSpot and the Weekend Backpack Program, ensuring children have access to nutritious meals year-round; and

**WHEREAS**, infrastructure and innovation, including the United Way of Palm Beach County Food Finder Map, the Geographic Pantry Assessment and a new commercial kitchen and food processing facility at the Palm Beach County Food Bank, have significantly expanded the county's hunger relief capacity and reduced food waste; and

WHEREAS, outreach to rural communities, especially in the Glades, has expanded through initiatives such as the Tri-City Garden Project, healthy corner stores, and strategic advocacy efforts to ensure access to food and resources for all; and

**WHEREAS**, while we celebrate 10 years of impact and collaboration, Palm Beach County residents continue to face food insecurity, underscoring the importance of sustained programs and initiatives through action, advocacy and innovation.

**NOW, THEREFORE**, I, Keith W. Babb, Jr., Mayor of the City of Pahokee, Florida, on behalf of the City Commission and our citizens, do hereby proclaim **September 2025** as **Hunger Action Month**.

In official recognition whereof, I hereunto set my hand and caused the seal of Pahokee to be affixed this  $23^{rd}$  day of September 2025.

Keith W. Babb, Jr.	Sanquetta Canan-Williams		
Mayor Keith W. Babb, Jr. Vice Mayor Sanquetta Cowan-			
Isabelle J. McDanald	Exercit D. Mc Pherson, Sr.		
Commissioner Isabelle J. McDonald	Commissioner Everett D. McPherson, Sr		
Ganes	. H. Scott		

Commissioner James H. Scott



#### **AGENDA**

#### **MEMORANDUM**

TO: HONORABLE MAYOR & CITY COMMISSIONERS

VIA: MICHAEL E. JACKSON, CITY MANAGER

FROM: Joseph R Martin, Finance Director

SUBJECT: Final Millage FY 2025 2026

DATE: 23rd September 2025

#### **GENERAL SUMMARY/BACKGROUND:**

In accordance with Florida Statute the City must approve a Resolution to adopt a "proposed millage" for the next fiscal year. A requirement of the Statutory Truth in Millage (TRIM) compliance.

Any changes proposed by the City Commission at this, the First Budget Hearing, will be incorporated into this budget.

**BUDGET IMPACT: YES** 

#### **LEGAL NOTE:**

Defer to City Attorney

#### **STAFF RECOMMENDATION:**

Staff recommends approval of Resolution 2025-54 setting the operating millage rate at 6.5419 mills for the Fiscal Year 2025-2026.

#### **ATTACHMENTS**:

Resolution 2025-54

#### **RESOLUTION 2025-54**

A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, ADOPTING A FINAL MILLAGE FOR THE FISCAL YEAR COMMENCING OCTOBER 1, 2025, THROUGH SEPTEMBER 30, 2026, PURSUANT TO SECTION 200.065, FLORIDA STATUTES; COMPUTING THE ROLLED-BACK RATE; PROVIDING FOR THE ADOPTION OF REPRESENTATIONS; PROVIDING FORWARDING INSTRUCTIONS; PROVIDING FOR AN EFFECTIVE DATE.

**WHEREAS**, Section 200.065, Florida Statutes, provides for the adoption of a final millage rate, together with the establishment of a rolled-back rate computed pursuant to Section 200.065(1), Florida Statutes; and

**WHEREAS**, the City Commission of the City of Pahokee, Florida, on September 8, 2025, adopted a Fiscal Year 2025-2026 Tentative Millage Rate following a public hearing as required by Section 200.065, Florida Statutes; and

WHEREAS, the current year's gross taxable value for operating purposes, not exempt from taxation, within Palm Beach County has been certified by the County Property Appraiser to the City of Pahokee as One Hundred-Thirty-Nine Million One Hundred Seventy-Nine Thousand Five Hundred Thirty-One Dollars (\$139,179,531.00); and

WHEREAS, the City Commission of the City of Pahokee, Florida, finds and determines that it is necessary for taxes to be levied upon all taxable real and personal property in the City of Pahokee, Florida in order to meet the obligations incident to providing for the orderly conduct of governmental business of the city, maintaining peace and good order in the City and payment of general operating expenses of the City; and

# NOW, THEREFORE, BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, AS FOLLOWS:

<u>Section 1.</u> <u>Adoption of Representations.</u> The foregoing whereas clauses are hereby ratified and confirmed as being true, and the same are hereby made a specific part of this Resolution.

<u>Section 2.</u> Final Millage. The City Commission of the City of Pahokee hereby adopts a final millage rate of 6.5419 mills for Fiscal Year 2025-2026, commencing October 1, 2025,

through September 30, 2026, which is \$6.5419 per \$1,000.00 of taxable property value within the City of Pahokee.

<u>Section 3.</u> Rolled Back Rate. The rolled-back rate for the City of Pahokee for the Fiscal Year commencing October 1, 2025, through September 30, 2026, shall be and is hereby fixed at the rate of 5.9585 mills. The levy of 6.5419 mills is greater than the rolled back rate of 5.9585 by 9.79 percent, as set forth in Exhibit "A" attached hereto.

<u>Section 4</u>. <u>Instructions to The City Clerk</u>. The City Clerk is directed to forward a copy of this resolution to the Palm Beach County Property Appraiser and the Palm Beach County Tax Collector.

<u>Section 5</u>. <u>Effective Date.</u> This resolution shall be effective immediately upon its passage and adoption.

**PASSED** and **ADOPTED** on this <u>23rd</u> day of September 2025.

	Keith W. Babb, Jr., Mayor
ATTEST:	
Nylene Clarke, CMC, City Clerk	
APPROVED AS TO FORM AND LEGAL SUFFICIENCY:	
Burnadette Norris-Weeks Attorney	

Moved by:		
Seconded by:		
VOTE:		
Mayor Babb	(Yes)	(No)
Vice Mayor Cowan-Williams	(Yes)	(No)
Commissioner McDonald	(Yes)	(No)
Commissioner McPherson	(Yes)	(No)
Commissioner Scott	(Yes)	(No)

## EXHIBIT "A"

Percentage of Increase in Millage Over Roll-Back Rate

(attached)

#### Percentage of Increase In Millage Over Roll-Back Rate:

The City of Pahokee's Percentage Increase in Millage over Rolled-Back Rate is 9.79%. Fiscal Year 2025-2026 <u>rolled-back taxes</u> are \$829,301 (95% budgeted = \$787,836) and Fiscal Year 2025-2026 <u>proposed taxes</u> are \$910,499 (95% budgeted = \$864,974). Fiscal Year 2025-2026 proposed <u>tax increase is</u> \$29,762 and Fiscal Year 2025-2026 <u>rolled-back rate is 5.9585</u>. The Fiscal Year 2024-2025 millage rate was 6.5419 and Fiscal Year 2025-2026 proposed millage is 6.5419. The Fiscal Year 2025-2026 proposed millage decrease is 0.00 and the 2024-2025 rolled-back rates was 6.0270.



#### **AGENDA**

#### **MEMORANDUM**

TO: HONORABLE MAYOR & CITY COMMISSIONERS

VIA: MICHAEL E. JACKSON, CITY MANAGER

FROM: JOSEPH R. MARTIN, FINANCE DIRECTOR

SUBJECT: FY 2025 2026 Final Budget

DATE: 23rd September 2025

#### **GENERAL SUMMARY/BACKGROUND:**

In accordance with Florida Statute 200.065 the City must approve a Resolution to adopt the "final budget" for the next fiscal year. This is required for Statutory Truth in Millage (TRIM) compliance.

Any changes adopted by the City Commission during the Tentative Budget Hearing, shall be incorporated into the Adopted Budget for Fiscal Year 2025 2026.

**BUDGET IMPACT: YES** 

**LEGAL NOTE: Defer to City Attorney** 

#### **STAFF RECOMMENDATION:**

Staffs recommend approval of Resolution 2025-55 approving the Final Budget for Fiscal Year 2025-2026.

#### **ATTACHMENTS**:

Resolution 2025-55

#### **RESOLUTION 2025-55**

A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA RELATING TO FINANCES, PROVIDING FOR THE ADOPTION AND FUNDING OF THE FINAL MUNICIPAL BUDGET OF THE CITY OF PAHOKEE, FLORIDA IN THE AMOUNT OF \$7,627,990.00, FOR THE FISCAL YEAR BEGINNING OCTOBER 1, 2025, AND ENDING SEPTEMBER 30, 2026; PROVIDING FOR ADOPTION OF REPRESENTATIONS; PROVIDING FOR AN EFFECTIVE DATE.

WHEREAS, the City Manager of the City of Pahokee ("City") has presented a tentative operating budget for the City for Fiscal Year 2025-2026, commencing October 1, 2025, through September 30, 2026; and

WHEREAS, the City Commission of the City of Pahokee ("City Commission") scheduled a first budget public hearing as required by Section 200.065, Florida Statutes, on September 8, 2025, and held its second public hearing as required by Florida Statutes on September 23, 2025, at 6:00 p.m.; and

WHEREAS, the budget hearings were properly advertised and noticed as required by Florida Statutes, giving the public and all interested parties an opportunity to address their comments to the City Commission, and the City Commission, having had an opportunity to review and approve the tentative budget and final budget, and having considered the comments of the public having complied with the "Truth in Millage (TRIM)" requirements of Florida Statutes, desires to adopt an operating budget for the fiscal year commencing October 1, 2025 as set forth in Exhibit "A" hereto.

#### Section 1. Adoption of Representations.

The foregoing "Whereas" clauses are hereby ratified and confirmed as being true and the same are hereby made a specific part of this Ordinance.

#### Section 2. Adoption of Final Budget.

The operating budget, attached as Exhibit "A," as presented by the City Manager, was tentatively adopted at first reading, held on September 8, 2025, subject to final adoption and amendments, as provided by Section 200.065 of the Florida Statutes. The City of Pahokee hereby adopts the final budget for the fiscal year beginning October 1, 2025, and ending September 30, 2026 as set forth in Exhibit "A" hereto, in the amount of \$7,627.990.00.

#### **Section 3.** Final Fund Budget.

The City Commission finds and determines that the sums set forth in the following final fund budgets are necessary to preserve the Public Health, Public Peace, and Public Welfare of the City of Pahokee, Florida, and are necessary to properly function as a City.

- (a) There is hereby appropriated for the General Fund of the City of Pahokee, Florida for the above-described fiscal year, the total sum of Five Million, Eight Hundred Twenty-One Thousand, Five Hundred Sixty-One Dollars (\$5,821,561.00) is hereby adopted (Exhibit "A").
- (b) There is hereby appropriated for the Henderson Endowment Fund of the City of Pahokee, Florida for the above-described fiscal year, the total sum of Twenty-Four Thousand Dollars (\$24,000.00) is hereby adopted (Exhibit "A").

- (c) There is hereby appropriated for the Special Revenue Fund of the City of Pahokee, Florida for the above-described fiscal year, the total sum of Five Hundred Thousand Dollars (\$500,000.00) is hereby adopted (Exhibit "A").
- (d) There is hereby appropriated for the Capital Project Fund of the City of Pahokee, Florida for the above-described fiscal year, the total sum of Six Hundred Seventy-Six Thousand, Nine Hundred Seventy-Two Dollars (\$676,972.00) is hereby adopted (Exhibit "A").
- (e) There is hereby appropriated for the Marina Campground Fund of the City of Pahokee, Florida for the above-described fiscal year, the total sum of Three Hundred Seventy-Seven Thousand, Thirty-One Dollars (\$377,031.00) is hereby adopted (Exhibit "A").
- (f) There is hereby appropriated for the Cemetery Fund of the City of Pahokee, Florida for the above-described fiscal year, the total sum of Two Hundred Twenty-Eight Thousand, Four Hundred Twenty-Six Dollars (\$228,426.00) is hereby adopted (Exhibit "A").
- <u>Section 3.</u> <u>Effective Date.</u> This Resolution shall be effective immediately upon its passage and adoption.

**DONE AND RESOLVED** at the Regular Meeting of the City Commission of the City of Pahokee, Florida, on this <u>23rd</u> day of September 2025.

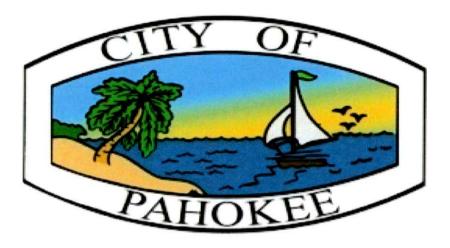
ATTEST:	Keith W. Babb, Jr., Mayor
Nylene Clarke, CMC, City Clerk	
APPROVED AS TO FORM AND LEGAL SUFFICIENCY:	
Burnadette Norris-Weeks, City Attorney	
Moved by:	
Seconded by:	
VOTE:	
	Yes) (No)
Vice Mayor Cowan-Williams(	Yes)(No)
	Yes)(No)
	Yes)(No)
Commissioner Scott (	(No)

### EXHIBIT "A"

### Proposed Budget FY 2025-2026

(attached)

# City of Pahokee, Florida 2025-2026 Proposed Budget



"The Grassy Waters Gateway to Lake Okeechobee"

207 Begonia Drive Pahokee, FL 33476

(561) 924-5534

www.cityofpahokee.com

**Proposed Budget** 

Monday, September 8, 2025



# City of Pahokee 2025-2026

"The Grassy Waters Gateway to Lake Okeechobee"

Keith W. Babb Jr. Mayor Sanquetta Cowan-Williams Vice Mayor

James H. Scott Commissioner Everett D. McPherson, Sr. Commissioner

Isabelle J. McDonald Commissioner

Michael E. Jackson City Manager

> Incorporated 1922 Population 5,579

Prepared by:

www.Cityofpahokee.com

#### City of Pahokee 2025-2026

#### Elected Officials

Keith W. Babb Jr.	Mayor
Sanquetta Cowan Williams	Vice Mayo
Isabelle J. McDonald	Commissione
Everett D. McPherson	
James H. Scott	Commissioner
Appointed	Officials
Michael E. Jackson	City Manager
Nylene Clarke	City Clerk
Burnadette Norris-Weeks	City Attorney
LT. Perrin	PBSO
Administ	tration
Alvin Johnson	Director of Public Works
Joseph R. Martin	Director of Finance
Vacant	Director Community Development
Raquel Prince	
Gregory Williams	Director of Parks and Recreation

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#### BUDGET SUMMARY FOR THE FISCAL YEAR ENDING SEPTEMBER 30, 2026

# THE PROPOSED OPERATING BUDGET EXPENDITURES/EXPENSES OF THE CITY OF PAHOKEE, FLORIDA ARE 14.7% LESS THAN PRIOR YEAR'S TOTAL OPERATING EXPENDITURES/EXPENSES

Roll back rate 5.9585									
		General	Henderson Endowment	Special Revenue	Debt Service	Capital Project	Marina Campground	Cemetery	Total
**************************************	-	Fund	Fund	Fund	Fund	Fund	Fund	Fund	Budget
Estimated Revenues:	34:11								
Taxes: Ad Valorem Taxes	Millage per \$1000 6,5419	864,974							964 974
Ad valorem Taxes Sales and Use Taxes	0.5419	1,357,000	-	500,000	-	-	-	-	864,974 1,857,000
Franchise Fees	-	482,000	-	200,000	•	-	<u>-</u>	-	482,000
Utility Service Taxes		407,000		-	_	, -	_	_	407,000
Licenses and Permits		185,650	_	_	-	-	_	-	185,650
Intergovernmental Revenue		378,699		-	_	676,972	_	-	1,055,671
Charges for Services		905,900	_	_	-	0,0,7,2	_	157,674	1,063,574
Fines and Forfeits		82,000	_	_	_	_	_	15,,5,,	82,000
Interest Earnings & Rents		134,600	24,000	_	_	_	216,000		374,600
Miscellaneous Revenue		66,500	_ ,,	_		_	,	_	66,500
Interfund Transfers In		-	-	-	-	-	161,031	70,752	231,783
Appropriated Fund Balance		957,238	-	-	-	-	-	-	957,238
Total Estimated Revenues, Transfers, and Appropriations	-	5,821,561	24,000	500,000	_	676,972	377,031	228,426	<b>7</b> ,627,990
Eman Etman (Emana)	٠								
Expenditures/Expenses: General Government		2,282,024	_	_	_	_	_	_	2,282,024
Public Safety		655,938	_	_	_	_	_	_	655,938
Physical Environment		720,000	_	500,000	•	676,972	377,031	228,426	2,502,429
Road and Street Expenses		851,819	=	-	-	5,5,7,2	-		851,819
Human Services		125,494	_	_	_	-	-	_	125,494
Culture and Recreation		978,503	-	-	_	_	_	_	978,503
Debt Service		-	-	-	-	-	_	-	· , ·
Interfund Transfers Out		207,783	24,000	-	-	-		-	231,783
Total Appropriated Expenditures/Expenses, Reserves and Transfers	_	5,821,561	24,000	500,000		676,972	377,031	228,426	7,627,990
** * * *	ππ								

THE TENTATIVE, PROPOSED BUDGETS ARE ON FILE IN THE OFFICE OF THE ABOVE MENTIONED TAXING AUTHORITY AS A PUBLIC RECORD.

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#### City of Pabokee, Florida Comparison By Fund For The Fiscal Year Ending September 30, 2026

	В	lopted udget	Proposed Budget				
Fund		4-2025	2	025-2026		Variance	% Inc/Dec
GENERAL FUND Total Revenues	<u>_ s</u>	5,438,908	s	5,821 <u>,561</u>	_\$_	382,653	7.04%
Expendiutures by Department							
Commission	\$	204,767	\$	202,767	\$	(2,000)	-0,98%
City Manager		317,292		326,544		9,252	2.92%
City Clerk		174,434		149,478		(24,956)	-14.31%
Financial & General Accounting		461,599		470,344		8,745	1,89%
Human Resources		105,130		125,494		20,364	19.37%
IT / GATV Access		40,000		43,800		3,800	9,50%
Legal Counsel		100,000		100,000		-	0.00%
Comprehensive Planning		15,250		15,250		-	0.00%
Police		623,938		655,938		32,000	5.13%
Protective Inspections Roads & Streets		348,501		353,633		5,132	1.47% 10.15%
Community Development		1,426,982 133,119		1,571,819 205,381		144,837 72,262	54.28%
Recreation (City)		697,273		757,236		59,963	8,60%
Recreation (PBC)		155,108		166,888		11,780	7,59%
Parks		52,759		54,379		1,620	3,07%
Non-Departmental		375,827		414,827		39,000	10.38%
Transfers Out		206,929		207,783		854	0.41%
Total Expenditures and Transfers	<u></u>	5,438,908	\$	5,821,561	\$	382,653	7.04%
Special Revenue Fund							
Revenue	s	867,000	\$	500,000	\$	(367,000)	-42.33%
Transfer In	•	807,000	•	200,000	.9	(307,000)	0.00%
Total Revenues and Transfers	\$	867,000	\$	500,000	\$	(367,000)	-42.33%
Expenses	s	867,000	\$	500,000	\$	(367,000)	0.00%
Transfers Out	\$		\$		_\$_		0.00%
Total Expenses and Transfers	<u>s</u>	867,000	S	500,000	<u>_s</u>	(367,000)	42.33%
HENDERSON ENDOWMENT FUND Revenue	\$	26,000	\$	24,000	\$	(2,000)	-7.69%
Transfer In		-	\$	<u> </u>	\$		0.00%
Total Revenues and Transfers	\$	26,000	\$	24,000	_\$_	(2,000)	-7,69%
Expenses	\$	-	\$	-	\$	-	0.00%
Transfers Out	<u></u>	26,000	\$	24,000	\$	(2,000)	-7.69%
Total Expenses and Transfers	\$	26,000	<u>s</u>	24,000		(2,000)	-7,69%
Capital Project Fund							
Revenue		2,005,780	\$	676,972	\$	(1,328,808)	-66.25%
Transfer In	<u>s</u>		_\$	-			0.00%
Total Revenues and Transfers		2,005,780		676,972		(1,328,808)	-66.25%
Expenses	\$	2,005,780	\$	676,972	\$	(1,328,808)	-66.25%
Transfers Out	\$	-	\$		\$		0.00%
Total Expenses and Transfers	s	2,005,780	S	676,972	\$	(1,328,808)	-66,25%
MARINA & CAMPGROUND FUND							
Revenue	\$	211,411	\$	216,000	\$	(4,589)	2,17%
Transfer In	\$	172,977	_\$	v 161,031	_\$_	(11,946)	-6.91%
Total Revenues and Transfers	\$	384,388	5	377,031		(16,535)	-1,91%
Expenses	s	384,388	\$	377,031	\$	(7,357)	-1.91%
Total Expenses and Transfers	\$	384,388	s	377,031	\$	(7,357)	-1.91%
CEMETERY FUND							
Revenue	\$	157,674	\$	157,674	\$	-	0.00%
Transfer In Total Revenues and Transfers	<u>\$</u>	59,952	<u>s</u>	70,752	\$	10,800	18.01%
total Vesculles and Translets	3	217,626	<u> </u>	228,426	_\$	10,800	4.96%
Expenses	2	217,626	\$	228,426	\$	10,800	4,96%
Total Expenses and Transfers	<u>_\$</u>	217,626	\$	228,426	\$	10,800	4.96%
TOTAL REVENUES - ALL FUNDS	<u>s</u>	8,939,702	<u> </u>	7,627,990	\$	(1,311,712)	-14.67%
	·						

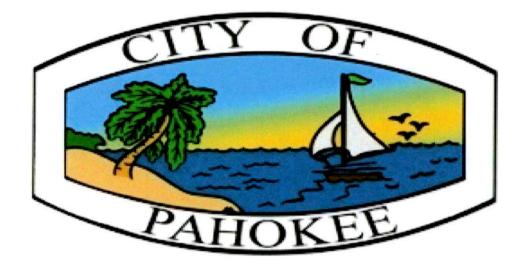
# General Fund For the Fiscal Year Ending September 30, 2026 (Proposed)

# **Personnel Service Detail**

Classification	<b>Number of Positions</b>
Accounts Payable Clerk	1
Athletic Coordinator/Facilities	1
Administrative Assistant	1
Assistant Director of Parks & Recreation	1
Cemetery Coordinator	1
Cemetery Worker I	2
City Clerk	1
City Manager	1
Executive Assistant	1
Planning, Building & Zoning Manager	1
Code Enforcement Officer (Part Time)	1
Code Enforcement Officer	1
Commission	5
Custodian /Parks & Marina Maintenance Helper	1
Grant Administrator	1
Director of Community & Economic Dev	1
Director of Finance	1
Director of Parks & Recreation	1
Director of Public Services	1
Assstant Director of Public Services	1
Recreational Specialist (Part time- Seasonal)	2
Human Resources /Risk & Public Safety Manager	1
Senior Accountant	1
Maintenance I (PW)	6
Maintenance II (PW)	1
Maintenance III	1
Marina / Public Service Clerk III	1
Public Services Assistant Director	1
Program Specialist I	1
Program Specialist II	1
Summer Camp Counselors	2
	43

			CITY OF PAHO	OKEE, FL					
		Persor	nel Service Cost	t by Departme	nt	= =====================================			
	Department / Division  2025 Funded Positions  Saltries  FICA  Retirement  Itel Health Workers Comp  TOTAL								
					Name of the last	ESCHALLS			
General Funds									
511000	City Commission	5			\$ 2,073		\$ 117	56,547	
512010	City Manager	2	170,000	13,005	47,163	7,800	476	238,444	
512020	City Clerk	1	76,385	5,844	5,615	10,400	284	98,528	
513010	Finance	4	267,899	20,494	19,691	41,300	702	350,086	
513020	Human Resources	1	72,100	5,516	5,299	10,400	464	93,779	
524000	Protective Inspections	4	202,801	15,514	13,411	31,350	3,007	266,083	
541000	Roads and Streets	11.5	423,057	32,364	31,360	80,000	35,053	601,834	
555000	Community Development	1	138,000	10,557	10,143	20,800	681	180,181	
572000	Recreation Dept- City	8	303,468	23,215	17,827	50,400	15,028	409,938	
572020	Recreation Dept-PBC	2	109,316	8,363	6,153	-	15,556	139,388	
572150	Parks Department	0		MANAGEMENT ASS.					
	General Funds Total							2,434,808	
Enterprise & Spec	cial Revenue Funds					EVEN ENGL	WALL COL		
575000	Marina & Campground	0.5	23,878	1,827	1,755	5,400		32,860	
539000	Cemetery	2	88,524	6,772	6,507	19,344	15,110	136,257	
	Enterprise Funds Totals		Jensey Links	<b>等性规则能够</b>	SURVEY TO THE CO				
	ALL TOTAL FUNDS	42	\$ 1,903,628	\$ 145,628	\$ 166,997	\$ 301,194	\$ 86,478	\$ 2,603,925	

# General Fund

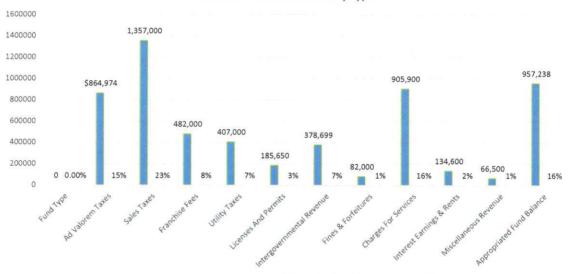


#### City of Pahokee, Florida Revenues by Type For The Fiscal Year Ending September 30, 2026

General Fund Revenues By Type

Fund Type		Proposed Budget	Percent of Total	
Ad Valorem Taxes	S	864,974	15%	
Sales Taxes		1,357,000	23%	
Franchise Fees		482,000	8%	
Utility Taxes		407,000	7%	
Licenses And Permits		185,650	3%	
Intergovernmental Revenue		378,699	7%	
Fines & Forfeitures		82,000	1%	
Charges For Services		905,900	16%	
Interest Earnings & Rents		134,600	2%	
Miscellaneous Revenue		66,500	1%	
Appropriated Fund Balance		957,238	16%	
Total Revenues	S	5,821,561	100%	

#### General Fund Revenues by type

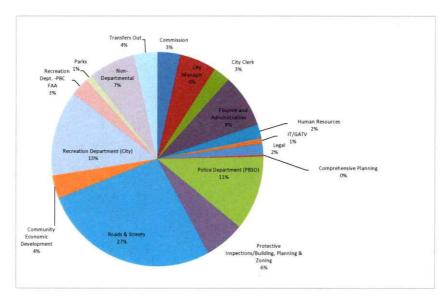


#### City of Pahokee, Florida Expenditures by Department For The Fiscal Year Ending September 30, 2026

General Fund -Expenditures by Department

Departments	Proposed Budget	Percent of Total
Commission	202,767	3.48%
City Manager	326,544	5.61%
City Clerk	149,478	2.57%
Finance and Administration	470,344	8.08%
Human Resources	125,494	2.16%
IT/GATV	43,800	0.75%
Legal	100,000	1.72%
Comprehensive Planning	15,250	0.26%
Police Department (PBSO)	655,938	11.27%
Protective Inspections/Building, Planning & Zoning	353,633	6.07%
Roads & Streets	1,571,819	27.00%
Community Economic Development	205,381	3.53%
Recreation Department (City)	757,236	13.01%
Recreation DeptPBC FAA	166,888	2.87%
Parks	54,379	0.93%
Non-Departmental	414,827	7.13%
Transfers Out	207,783	3.57%
Total Expenditures	\$ 5,821,561	100.00%





### City of Pahokee, Florida Schedule of Budgeted Revenues

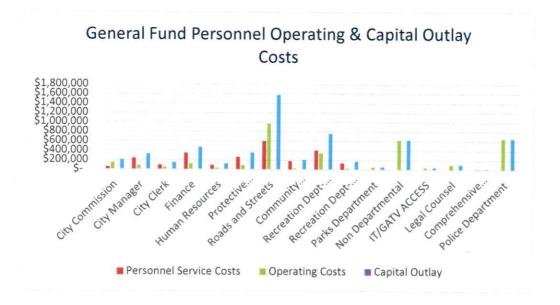
For The Fiscal Year Ending September 30, 2026

		As of 4/2025			
		Adopted	Actual	Proposed	
		Budget	YTD	Budget	
Account #	Account Name	2024-2025	2024-2025	2025-2026	
311000	Current Year Ad Valorem Taxes	\$ 793,451	670,419	864,974	
311100	Early Payment Discounts	(18,000)	(22,364)	(18,000)	
311200	Prior Years' Ad Valorem Taxes	18,000	1,392	18,000	
312100	New Local Option Gas Tax (Ct	60,000	32,484	60,000	
312200	Local Option Gas Tax	135,000	71,608	126,000	
313100	Franchise Fees - Electric	300,000	107,676	280,000	
313400	SWA Recycling Shared Revenue	-	207	-	
314100	Communication Service Tax	80,000	45,325	78,000	
314200	Water Utility Service Tax	72,000	33,330	68,000	
314300	Propane Utility Service Tax	6,500	2,438	9,000	
314400	Electric Utility Service Tax	340,000	155,943	330,000	
321000	Business Tax Receipts	18,000	17,292	18,000	
321051	Business Tax Receipts(Late Fees)	2,200	537	500	
338100	County Business Tax Receipts	16,000	3,274	, 14 <b>,</b> 000	
322000	Building Permits	85,000	28,806	80,000	
322010	Court Administration Fee	3,000	1,825	3,000	
322500	Inspection Fee	9,500	4,540	8,000	
323500	Education Fee	2,500	792	2,000	
324000	Site Plan Review	50,000	16,545	50,000	
324200	Site Plan - Rezoning Fees	5,000	4,450	2,250	
324300	PBZ Advertising	2,500	-	2,000	
325000	Vendor /Application Fee	50	72	100	
326000	Mobile Home/RV permit fees	300	-	300	
334100	FL DOT Lighting Agreement	69,574	-	50,785	
335200	State Revenue Sharing	470,000	214,577	462,000	
335300	Mobile Home Licenses	5,500	3,854	5,500	
335400	Alcoholic Beverage Licenses	5,000	24	5,000	
335500	8th Cent Motor Fuel Tax-Trns	92,000	54,014	96,000	
335700	1/2 Cent Sales Tax	547,000	259,584	529,000	
335490	DOR - Motor Fuel Tax Refunds	1,800	-	1,000	
337120	PBC Economic Development Grant (CDBG)		-	41,714	
338200	DJJ - Paymt in Lieu of Taxes	142,900	-	142,900	
338300_	PHA - Paymt in Lieu of Taxes	25,000	•	25,000	
337100	PBC Sheriff-LETF	` -	. 32,000	32,000	
337875	Early Learning Coalition	75,000	47,281	85,000	
341300	Election Qualifying Fee	500	250	500	
341400	Title Searches	6,000	4,421	4,000	
341500	Photo Copy Charges	1,000	208	900	
366400	Bench Advertising Revenue	1,900	1,085	1,900	
347005	Admission/Gate Fees	-		6,100	
347007	After School Rec Activity Fe	2,500	2,465	3,500	
347010	Summer Recreation Program Fe	7,020	<del>'</del> -	7,500	

# Schedule of Budgeted Revenues For The Fiscal Year Ending September 30, 2026

·	For the ristar rear Enum	As of 4/2025							
		Adopted	Actual	Proposed					
		Budget	YTD	Budget					
Account #	Account Name	2024-2025	2024-2025	2025-2026					
347011	Basketball/Baseball/Softball	500	150	500					
347013	Basketball - Sponsorship Fee	5,400	750	5,400					
347015	Basketball/Baseball Donation	600	-	600					
347020	Cheerleader Registration	15,000	-	16,000					
347027	Track - Registration Fees	500	_	250					
347040	Orange Bowl - Sponsorship	7,000	5,500	6,000					
347041	Donation - Dick's Sporting Goods	5,000		5,000					
347042	Football - Registration	27,000	2,005	28,000					
347043	Flag Football - Sponsorship	4,000	-						
347045	Flag Football - Concessions	10,000	7,273	15,000					
347046	Recreational Activities Dona	1	500	1,000					
347047	Recreation Department - Donations	2,500	-	2,500					
350100	Court Fines	2,000	2,945	2,000					
350500	Code Enforcement Fines	80,000	98,892	80,000					
350505	Vacant Properties Registry	1,300	-	1,300					
360100	Interest Income	4,000	2,166	3,200					
360350	Interest - SBA	19,800	10,140	15,300					
360500	Interest Delinquent Tax	-	332	500					
361049	Interest - Investment	1,000	4,345	6,500					
361050	Interest Income	4,000	_	4,000					
362200	Rents - Metro PCS	25,500	15,348	26,000					
362300	Rents - Cafeteria	4,000	1,900	6,500					
362400	Rent-Everglades Preparatory	36,200	18,084	42,000					
362590	Rent-Lutheran Services	27,600	16,097	30,000					
362900	Rent- Seniors Room	250		200					
362910	Rent -MLK Parks/Comm	200	_	200					
362920	Rent-Athletic Field	300	-	200					
363100	Donations - Back to School Bash	5,000	_ 1	5,000					
363000	Donations	28,600	_	15,000					
364200	Insurance Proceeds	20,000	22,689	20,000					
369098	Other Miscellaneous Revenues	12,700	1,435	6,000					
343600	Water Entity Fees	192,000	103,668	202,000					
343400	Garbage Fee Income	573,000	286,429	716,250					
343420	Container Fee Income	20,000	9,939	25,000					
343430	Recycling Fee Income	42,000	20,945	52,500					
343700	Infrastructure Fee	28,000	12,484	28,000					
381000	Interfund Trns		29,000						
389408	Other Sources: Appropriated Fund Balance	800,263	27,000	957,238					
	• •		.,						
	TOTAL REVENUES/OTHER SOURCES	\$ 5,438,908	2,469,370	5,821,561					

Department / Division	Personnel Service Costs	Operating Costs	Capital Outlay	Total
City Commission	\$ 56,547	\$ 146,220		\$ 202,767
City Manager	238,444	88,100		326,544
City Clerk	98,528	50,950		149,478
Finance	350,086	120,258		470,344
Human Resources	93,779	31,715		125,494
Protective Inspections	266,083	87,550		353,633
Roads and Streets	601,834	969,985	-	1,571,819
Community Development	180,181	25,200		205,381
Recreation Dept- City	409,938	347,298		757,236
Recreation Dept-PBC	139,388	27,500		166,888
Parks Department	-	54,379		54,379
Non Departmental	A	622,610		622,610
IT/GATV ACCESS	-	43,800		43,800
Legal Counsel		100,000		100,000
Comprehensive Planning	-	15,250		15,250
Police Department	E	655,938		655,938
Total %	42%	58%	0%	100%



#### City of Pahokee, Florida Schedule of Expenditures

#### For The Fiscal Year Ending September 30, 2026

#### Dept 511000 City Commission

			Adopted		Actual	]	Proposed.
		1	Budget		YTD		Budget
Object#	Account Name 1	2	2024-2025		024-2025	2	025-2026
110	Executive Salaries	\$	28,200	\$	16,450		28,200
110/120/130	Salaries & Wages		28,200	l	16,450		28,200
210	FICA Taxes		2,157		2,550	İ	2,157
220	FLC Ret 3%		846		242		846
221	FLC 4.35%	1	1,227		350		1,227
230	Life and Health Insurance		26,000		8,786	ļ	24,000
240	Worker's Compensation		117		68		117
	TOTAL PERSONNEL SERVICE		58,547		28,446		56,547
310	Professional Fees	ł	36,000		18,651		36,000
360	Travel & Per Diem	1	60,000		17,321		60,000
367	Other Charges		10,000		1,048		10,000
482	Tri-Cities Barbecue		5,000		3,089		5,000
483	Tri-Cities Meeting		900		-		900
489	Contributions & Sponsorships		11,000		3,053		10,000
515	Dues		6,500		2,307		7,500
528	Uniforms	i	420		148		420
520	Operating Supplies		400		84	i	400
561	Conference Registrations		16,000		-		16,000
	TOTAL OPERATING EXPENDITURES		146,220		45,701		146,220
	*Total City Commission	s	204,767	\$	74,147	\$	202,767
	,	Ě	20 191 01		7 192 17	<u> </u>	202,707

#### Dept 512010 City Manager

		As of 4/2025															
		Ā	Adopted Actual		Actual Pro		roposed										
			Budget		Budget		YTD		Budget								
Object #	Account Name	20	2024-2025		2024-2025		2024-2025		2024-2025		2024-2025		2024-2025		24-2025	20	25-2026
110	Executive Salaries	\$	120,000	\$	65,933	\$	120,000										
120	Regular Salaries & Wages	ļ	50,000		-		50,000										
110/120/130	) Salaries & Wages		170,000		65,933		170,000										
210	FICA Taxes		13,005		5,044		13,005										
211	FRS Retirement Contributions		17,892		2,620		43,488										
220	League of Cities Retirement 3%	l	1,500		-		1,500										
221	FLC Ret 4.35%		2,175		-		2,175										
230	Life and Health Insurance	l	11,500		-		7,800										
240	Worker's Compensation		476		278		476										
	TOTAL PERSONNEL SERVICE		216,548		73,875		238,444										
310	Professional Fees	l	5,280		-		5,000										
340	Contractual Services	l	60,000		15,000		40,000										
360	Travel & Per Diem -Seminars		16,000		599		10,000										
367	Other Charges		4,000		540		4,000										
368	City Manager Luncheons		1,500		-		1,500										
461	Repairs/Maintennce		2,000		417		10,000										
515	Dues		3,000		173		3,000										
520	Operating Supplies		500		239		1,000										
521	Computer Supplies		-		_		5,000										
524	Fuel		4,000		880		3,000										
528	Uniforms		300		18		300										
559	Books & Subscriptions		300		-		300										
561	Conference Registration		3,864		-		5,000										
	TOTAL OPERATING EXPENDITURES		100,744		17,866		88,100										
			_														
	*Total City Manager	\$	317,292	\$	91,741	\$	326,544										

#### Dept 512020 City Clerk

		As of 4/2025					
			Adopted		Actual	I	roposed
		İ	Budget		YTD		Budget
Object #	Account Name	20	024-2025	20	24-2025	2	025-2026
110	Executive Salaries	\$	69,903	\$	40,028	\$	74,160
130	COLA		_				_
	3% Cost of Living Increase		2,097				2,225
110/120/130	<del>-</del>		72,000		40,028		76,385
210	FICA Taxes		5,508		2,773		5,844
220	FLC Ret 3%		2,160		1,201		2,292
221	FLC Ret 4.35%		3,132		1,741	l	3,323
230	Life and Health Insurance		10,400		6,429		10,400
240	Worker's Compensation		284		166		284
	TOTAL PERSONNEL SERVICE		93,484		52,338	İ	98,528
			-				
310	Professional Services		25,000		-		5,000
340	Contractual Services		10,000		-		15,000
360	Travel & Per Diem		6,000		127		6,000
367	Other Charges		5,000		70		5,000
414	Celluar Service		800		635		800
461	Repair/Maintenance		500		-		500
490	Advertising	İ	2,100		2,090		2,100
497	Election Staffing		15,000		14,854		
515	Dues		1,300		208	Ī	1,300
524	Fuel		250		-		250
561	Conference Registration		5,000		_		5,000
600	Software w/		10,000		-		10,000
	TOTAL OPERATING EXPENDITURES		80,950		17,984		50,950
	*Total City Clerk	\$	174,434	\$	70,322	\$	149,478

#### Dept 513010 Financial & General Accounting

		As of 4/2025																	
	(	Ā	Adopted		Actual	F	Proposed												
			Budget		YTD		Budget												
Object#	Account Name	20	2024-2025		2024-2025		2024-2025		2024-2025		2024-2025		2024-2025		2024-2025		024-2025	2	025-2026
110	Executive Salaries	\$	85,000	\$	48,115	\$	87,550												
120	Regular Salaries & Wages		167,421		94,845	ľ	172,546												
130	COLA		-		-		-												
	3% Cost of Living Increase		7,573		-		7,803												
110/120/130	Salaries & Wages		259,994		142,960		267,899												
210	FICA Taxes		19,890		10,537		20,494												
220	FLC Ret 3%		7,800	ĺ	4,289		8,037												
221	FLC Ret 4.35%		11,310		5,319		11,654												
230	Life and Health Insurance		41,300		25,813		41,300												
240	Worker's Compensation	l	702		409		702												
	TOTAL PERSONNEL SERVICE		340,996		189,327		350,086												
310	Professional Fees		50,000		14,400		45,000												
311	Drug Testing		200		- ;		200												
320	Accounting & Auditing		36,000	i	36,000		36,000												
360	Travel & Per Diem		6,000		-		6,000												
367	Other Charges		600		882		1,600												
461	Repair & Maintenance		1,000		-		1,000												
470	Accounting Software Service		13,793		13,793		15,448												
478	Printing (Checks & Deposit slips)	ĺ	550	l	-		550												
490	Advertising		1,000		-		2,600,												
492	Bank Charges/Fees		2,000		1,506		2,500												
515	Dues		600		-		1,000												
520	Operating Supplies		<sub>1</sub> 3,000		253		2,500												
524 *	Fuel		460		-		460												
528	Uniforms		400		152		400												
561	Conference Registrations		5,000		170		5,000												
	TOTAL OPERATING EXPENDITURES		120,603		67,156		120,258												
	*Total Financial & General Accounting	\$	461,599	\$	256,483	\$	470,344												

#### Dept 513020 Human Resources

		As of 4/2025																							
		7	Adopted		Actual		Proposed																		
		ı	Budget		Budget		Budget		Budget		Budget		Budget		Budget		Budget		Budget		Budget		YTD		Budget
Object#	Account Name	2	2024-2025		2024-2025		2024-2025		2024-2025		2024-2025		2024-2025		2024-2025		2024-2025		2024-2025 2024-20		2024-2025		2025-2026		
110	Executive Salaries	\$	60,000	\$	37,905	\$	70,000																		
130	COLA	1	-		-		-																		
	3% Cost of Living Increase		_		_		2,100																		
110/120/130	Salaries & Wages		60,000		37,905		72,100																		
210	FICA Taxes		4,590	1	2,807		5,516																		
220	FLC Ret 3%	1	1,800		249		2,163																		
221	FLC Ret 4.35%	1	2,610		361		3,136																		
230	Life and Health Insurance		10,400		7,260		10,400																		
240	Worker's Compensation	ı	464		271		464																		
	TOTAL PERSONNEL SERVICE		79,864		48,853		93,779																		
310	Professional		950		•		900																		
340	Contractual Services		-		-		5,000																		
360	Travel & Per Diem		780		-		1,400																		
367	Other Charges	ı	550		908		500																		
461	Repairs/Maintenance		316		-		300																		
478	Printing		150		-		250																		
490	Advertising	i	400		-		200																		
494	Background Screening		500	İ	52		640																		
515	Dues	1	500		10		450																		
520	Operating Supplies		500		1,400		1,400																		
521	Computer Supplies		400		-		400																		
528	Uniforms		120		36		75																		
561	Conference Registrations	1	1,100		-		1,200																		
576	Maint - Payroll Program		19,000		11,219		19,000																		
	TOTAL OPERATING EXPENDITURES		25,266		13,625		31,715																		
	*Total Human Resources	\$	105,130	\$	62,478	\$	125,494																		

2

#### City of Pahokee, Florida Schedule of Expenditures For The Fiscal Year Ending September 30, 2026

### Dept 513030 IT / GATV ACCESS

		AS 01 4/2025							
		Adopted Budget		Actual	]	Proposed			
				YTD		Budget			
Object # Account Name	Account Name 2024-2025		20	24-2025	2025-2026				
310 Professional Services	\$	40,000	\$	24,633	\$	43,800			
TOTAL OPERATING EXPENDITU	RES	40,000		24,633	_	43,800			
*Total IT / GATV Access	\$	40,000	\$	24,633	\$	43,800			

# Dept 514000 Legal Counsel

		Adopted		dopted Actual			Proposed
		Budget			YTD		Budget
Object # Acco	ount Name	20	24-2025	20	24-2025	2	2025-2026
310 Professional Fee	3	\$	100,000	\$	50,000	\$	100,000
TOTAL OPERATING I	<i>EXPENDITURES</i>		100,000		50,000		100,000
*Total Legal (	Counsel	\$	100,000	\$	50,000	\$	100,000

# Dept 515000 Comprehensive Planning

Object # Account Name 2		] ]	dopted Budget 24-2025	Actual YTD 2024-2025		Proposed Budget 2025-2026	
310	Professional Fees	\$	12,000	\$	-	\$	12,000
367	Other Charges		250	İ	_		250
490	Advertising		3,000		-		3,000
TOTAL O	PERATING EXPENDITURES		15,250	_			15,250
*Tota	l Comprehensive Planning	\$	15,250	\$	-	\$	15,250

# Dept 521000 Police Department (PBSO)

		Adopted		Actual				roposed
			Budget		YTD		Budget	
Object #	Account Name	20	024-2025	20	024-2025	20	025-2026	
310	Professional Services	\$	623,938	\$	407,959	\$	623,938	
340	Contract - Service PBSO		-		32,000		32,000	
TOTAL	COPERATING EXPENDITURES		623,938		439,959		655,938	
	*Total Police Department	\$	623,938	\$	439,959	\$	655,938	

Dept 524000 Building, Planning & Zoning/Protective Inspections

		A3 01 412023			
		Adopted	Proposed		
		Budget	YTD	Budget	
Object #	Account Name	2024-2025	2024-2025	2025-2026	
120	Regular Salaries & Wages	\$ 171,987	\$ 97,247	\$ 177,160	
130	COLA & Part Time Wages	19,734	10,843	19,734	
	3% Cost of Living Increase	5,752	\$ -	5,907	
110/120/130	Salaries & Wages	197,473	108,090	202,801	
210	FICA Taxes	15,107	7,669	15,514	
220	FLC Ret 3%	5,924	2,917	5,474	
221	FLC Ret 4.35%	8,590	4,230	7,937	
230	Life and Health Insurance	31,350	19,360	31,350	
240	Worker's Compensation	3,007	1,754	3,007	
	TOTAL PERSONNEL SERVICE	261,451	144,020	266,083	
	İ				
310	Professional Services	62,000	47,795	62,000	
360	Travel & Per Diem	5,000	360、	6,000	
461	Repair/Maintenance	500	40	-	
478	Printing	500	-	400	
515	Dues	2,500	255	2,500	
520	Operating Supplies	3,500	2,092	3,500	
524	Fuel	1,500	764	1,500	
528	Uniforms	250	324	350	
561	Conference Registration	1,300	512	1,300	
577	Program-BPC Code Software Service	10,000	9,998	10,000	
	TOTAL OPERATING EXPENDITURES	87,050	62,140	87,550	
•			`		
	*Total Protective Inspections	\$ 348,501	\$ 206,160	\$ 353,633	

# Dept 541000 Roads & Streets

As	οf	4	12	N	2.5	
		• 7	-	v	4.	

,			Adopted	Actual	Proposed
			Budget	YTD	Budget
Object #	Account Name	] :	2024-2025	2024-2025	2025-2026
110	Executive Salaries	\$	75,000	\$ 42,455	\$ 77,250
120	Regular Salaries & Wages	1	330,670	154,477	266,774
130	COLA & Part Time Wages		-	-	67,200
	3% Cost of Living Increase		10,298	817	11,833
110/120/130	Salaries & Wages		415,968	197,749	423,057
210	FICA Taxes	1	31,822	14,214	32,364
211	FRS Retirement Contributions	1	10,550	5,787	11,164
220	FLC Ret 3%	ı	12,479	4,286	8,243
221	FLC Ret 4.35		18,095	5,270	11,953
230	Life and Health Insurance		82,500	48,517	80,000
240	Worker's Compensation		35,053	20,448	35,053
	TOTAL PERSONNEL SERVICE		606,467	296,271	601,834
310	Professional Services		0.500		2 000
310	Drug Testing		2,520	-	2,000
320	Accounting & Auditing		400	210	400
340	Contractual Services		6,000	5,000	5,000
352	Tipping Fees		525,000	361,368	720,000
360	Travel & Per Diem		2,000	-	2,000
367	Other Charges	ŀ	1,500	-	1,500
410	Communications - Local Service		3,000	3,072	4,500
413	Communications - Local Service  Communications - Long Distance		2,000	371	1,000
431	Electric Service		3,000	1,966	3,000
\ 432	Water, Sewer & Solid Waste S		105,000 4,000	59,985	.105,000
450	General Liability Insurance	1	30,758	2,289	4,500
451	Auto Liability Insurance		6,346	17,731 3,097	30,758
452	Property Insurance	İ	7,681	3,384	6,346
461	Repair/Maintenance		72,000	18,003	7,681
480	Promotional Activities		510	10,003	40,000
498	Vehicle Registration Fees		200	-	500
510	General Office Supplies	1	300	-	300
520	Operating Supplies		7,200	3,362	7,000
524	Fuel		24,000	7,647	18,000
525	Chemicals	1	2,500	7,047	2,000
526	Small Equipment	1	5,500	740	1,500
528	Uniforms	1	3,600	2,313	3,000
529	Protective Apparel		1,000	2,515	1,000
555	Sign/Sidewalk/Street/Replacements	ŀ	2,500	-	1,500
561	Conference Registrations		2,000	_	1,500
•	TOTAL OPERATING EXPENDITURES		820,515	490,538	969,985
	*Total Roads & Streets	\$	1,426,982	\$ 786,809	\$ 1,571,819
	Solid Waste Expense (Physical Services)		525,000	331,960	720,000
	*Total Roads & Streets	•	001.002	£ 454.940	051.010
	TOTAL MORRES & DIVERS	\$	901,982	\$ 454,849	\$ 851,819

### Dept 555000 Community Economic Development

		As of 4/2025					
		A	Adopted Actual			P	roposed
			Budget		YTD		Budget
Object #	Account Name	20	024-2025	20	24-2025	20	025-2026
110	Executive Salaries	\$	75,000	\$	45,290	\$	78,000
120	Regular Salaries & Wages		-		-		60,000
130	COLA		-		-		-
	3% Cost of Living Increase		2,250		-		-
110/120/130	Salaries & Wages		77,250		45,290		138,000
210	FICA Taxes	,	5,910	İ	3,174		10,557
220	FLC Ret 3%	1	2,317		1,004		4,140
221	FLC Ret 4.35%		3,361		1,456		6,003
230	Life and Health Insurance		10,400		3,261		20,800
240	Worker's Compensation		681		397		681
	TOTAL PERSONNEL SERVICE		99,919		54,582		180,181
360	Travel & Per Diem		2,000		_		2,000
367	Other Charges		1,500		1,280		1,500
461	Repair/Maintenance		200		1,200		200
478	Printing		500		_		500
480	Promotional activities & Events	1	25,000		26,350		18,000
490	Advertising		25,000		431		500
515	Dues		500		-		500
520	Operating Supplies		500		-		500
524	Fuel		500		_		500
561	Conference Registration		2,500		-		1,000
	TOTAL OPERATING EXPENDITURES		33,200		28,061		25,200
	*Total Community Development	\$	133,119	\$	82,643	\$	205,381
				L			

### Dept 572000 Recreation Department - City

			A\$ 01 4/2025	
		Adopted	Actual	Proposed
		Budget	YTD	Budget
Object#	Account Name	2024-2025	2024-2025	2025-2026
110	Executive Salaries			
120		\$ 66,512	\$ 37,653	\$ 68,508
	Regular Salaries & Wages	166,782	68,235	168,083
130	COLA & Part Time Wages	41,200	863	60,100
	3% Cost of Living Increase	6,999	-	6,777
	Salaries & Wages	281,493	106,751	303,468
210	FICA Taxes	21,534	7,838	23,215
220	FLC Ret 3%	7,209	2,612	7,276
221	FLC Ret 4.35%	10,453	2,672	10,551
230	Life and Health Insurance	40,000	22,620	50,400
240	Worker's Compensation	15,028	8,766	15,028
	TOTAL PERSONNEL SERVICE	375,717	151,259	409,938
320	Annual Audit Fee	2,500	1,440	2,500
340	Contract - Janitorial Service	2,000	-	2,700
342	Copier Lease	5,000	2,715	5,550
354	Permit	1,500	-	500
360	Travel & Per Diem	500	-	4,500
367	Other Charges	11,000	6,036	12,000
410	Communications - Local Service	9,000	2,178	4,000
411	Gym Alarm Honeywell (entire complex)	1,000	318	800
413	Communications - Long Distance	500	-	500
415	Internet Service	7,600	4,227	7,600
420	Postage	200		200
431	Electric Service	47,000	30,131	48,000
432	Water, Sewer, & Solid Waste	8,000	4,732	8,500
436	Solid Waste Assessment	6,000	3,093	7,000
450	General Liability Insurance	33,834	19,505	33,834
451	Auto Liability Insurance	8,132	3,969	8,132
452	Property Insurance	69,132	30,454	69,132
461	Repair/Maintenance	22,500	18,755	23,000
493	Background Screening Coaches		10,755	3,000
494		450		
494 495	HRS Background Screening	250	-	250
496	Cafeteria Expenses	2,000	-	1,000
490 499	Security (Special Events)	1,008	-	1,500
	Annual Fire Safety Ins	1,000	570	1,200
510	General Office Supplies	2,000	476	2,000
515	Dues	1,500	1,230	3,200
520	Operating Supplies	12,600	3,879	10,000
521	Computer Supplies	1 -	-	2,000
524	Fuel	13,000	7,065	14,000
528	Uniforms	1,800	568	1,800
530	Food - After School Program	3,000	2,673	4,000
551	Misc. Expenses - After School Program	1,000	883	1,200
537	Program Supplies	35,000	8,108	35,000
539	Program Supplies- After School	-	-	17,000
544	Back-To-School BASH	10,000	85	10,000
561	Conference registration	2,000		1,700
1	TOTAL OPERATING EXPENDITURES	321,556	153,090	347,298
	ATT ATT ATT TO THE STATE OF THE			
	*Total Recreation Department - City	\$ 697,273	\$ 304,349	\$ 757,236

# <u>Dept 572020 Recreation Department - PBC</u>

As of 4/2025

		113 01 1/2020			
		Adopted	Proposed		
		Budget	YTD	Budget	
Object #	Account Name	2024-2025	2024-2025	2025-2026	
120	Regular Salaries & Wages	\$ 103,041	\$ 58,331	106,132	
130	COLA & Part Time Wages		_		
	3% Cost of Living Increase	3,091	_	3,184	
110/120/130	Salaries & Wages	106,132	58,331	109,316	
210	FICA Taxes	8,119	4,272	8,363	
220	FLC Ret 3%	3,184	886	1,398	
221	FLC Ret 4.35%	4,617	1,082	4,755	
240	Worker's Compensation	15,556	9,074	15,556	
	TOTAL PERSONNEL SERVICE	137,608	73,645	139,388	
7					
360	Travel and Per Diem	2,000	128	2,000	
528	Uniforms	1,500	<b>i</b> -	1,500	
530	Food - After School Program	2,000	156	4,000	
535	Contributions & Sponsorships	5,000	<u>-</u>	5,000	
537	Program Supplies	5,000	6,742	13,000	
561	Conference Registration	2,000	<b>1</b>	2,000	
	TOTAL OPERATING EXPENDITURES	17,500	7,026	27,500	
	*Total Recreation Department - PBC	\$ 1 <u>55</u> ,108	\$ 80,671	\$ 166,888	

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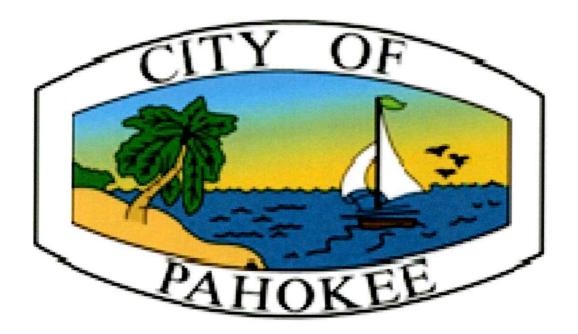
# Dept 572150 Parks Department

		Adopted Actual		Actual	P	roposed		
		]	Budget	YTD		t YTD Bu		Budget
Object #	Account Name	2024-2025 2024-2025		2024-2025		20	25-2026	
320	Accounting & Auditing	\$	500	\$	-	\$	500	
431	Electric Service		5,500		3,102	ŀ	6,200	
432	Water, Sewer & Solid Waste S		18,580		10,596		19,000	
436	Solid Waste Assessment		7,000		3,095		7,500	
450	General Liability Insurance		9,227		5,319		9,227	
452	Property Insurance		9,602		4,230		9,602	
461	Repair/Maintenane		1,600		450		1,600	
499	Annual Fire Safety Inspection		50		-		50	
520	Operating Supplies		200		-		200	
525	Chemicals		500		-		500	
	TOTAL OPERATING EXPENDITURES		52,759		26,792		54,379	
	*Total Parks Department	\$	52,759	\$	26,792	\$	54,379	

# Dept 590000 Non-Departmental

		Adopted	Proposed	
		Budget	YTD	Budget
Object #	Account Number/Name	2024-2025	2024-2025	2025-2026
310	Professional Fees	\$ 20,000	\$ 516	\$ 20,000
342	Copier Lease	19,000	8,048	21,000
349	Lease -Vehicles	20,000	_	_
367	Other Charges-City Hall	25,000	11,000	25,000
410	Communications - Local	14,000	7,527	14,000
415	Internet for City	8,000	5,008	8,000
420	Postage	6,000	3,640	6,000
431	Electric Service	9,500	6,142	9,500
432	Water, Sewer and Solid Waste	5,500	2,015	5,500
434	East Beach Water Assessment-Inc 246 E Main	6,500	5,037	6,500
436	Solid Waste Assessment	4,000	3,095	4,000
440	Rentals and Leases	2,500	-	2,500
450	General Liability Insurance	67,668	39,009	67,668
451	Auto Liability Insurance	4,165	2,033	4,165
452	Property Insurance	67,211	29,608	67,211
453	Cyber Security	4,118	2,402	4,118
461	Repair/Maintenance	38,000	2,916	35,000
478	Printing	1,000	-	1,000
480	Promotional Activities	1,000	250	1,000
487	Employee of the Quarter	700	-	700
488	Employee of the Year	500	-	500
492	Bank Charges/Fees	100	-	100
499	Annual Fire Safety Inspection	200	-	200
510	General Office Supplies	11,000	5,610	11,000
515	Books, Dues & Subsription	165	_	165
546	Fourth of July Celebration	20,000	-	20,000
548	Christmas Celebration	20,000	_	20,000
919	Contingencies	-	-	60,000
	TOTAL OPERATING EXPENDITURES	375,827	133,856	414,827
			<u> </u>	
920	Interfund Transfer	206,929		207,783
	TOTAL INTERFUND TRANSFER	206,929		207,783
	477 - 137 - 5			
	*Total Non-Departmental	\$ 582,756	\$ 133,856	\$ 622,610
			_	

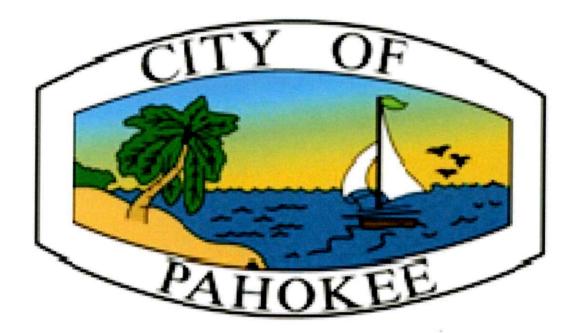
# Henderson Endowment Fund



# Fund 051 - Henderson Endowment

		113 01 112020					
			Actual	Proposed			
		Budget	YTD	Budget			
Object#	Account Number/Name	2024-2025	2024-2025	2025-2026			
	REVENUES/OTHER SOURCES						
360150	Interest Income	26,000	10,863	24,000			
		1					
	TOTAL REVENUES/OTHER SOURCES	26,000	10,863	24,000			
	EXPENDITURES						
539100	Interfund Tsfr Out - Cemetery	26,000	10,863	24,000			
	TOTAL EXPENSES	\$ 26,000	\$ 10,863	\$ 24,000			

# Special Revenue Fund



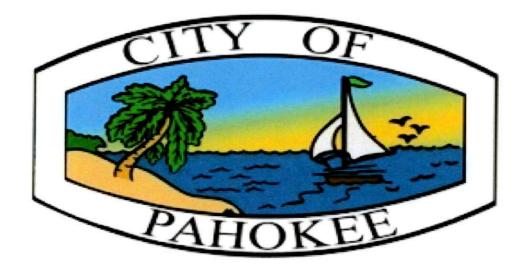
Section H, Item 2.

# City of Pahokee, Florida Schedule of Revenues and Expenditures For The Fiscal Year Ending September 30, 2026

# Fund 100 - Special Revenue Fund

Object#	Account Number/Name		Adopted Budget 024-2025	2	Actual YTD 024-2025	roposed Budget 025-2026
<u> </u>	REVENUES/OTHER SOURCES					
335800	Disc Sales Surtax 1%	\$	867,000	\$	275,814	\$ 500,000
,	TOTAL REVENUES/OTHER SOURCES	<u> </u>	867,000		275,814	500,000
631	EXPENDITURES Capital Outlay Disc Surtax (1%)		867,000		61,600	500,000
	TOTAL EXPENSES	\$	867,000	\$	61,600	\$ 500,000

# Capital Project Fund



Section H, Item 2.

# City of Pahokee, Florida Schedule of Revenues For The Fiscal Year Ending September 30, 2026

# Fund 330 - Capital Project Fund

1

Object #	Account Number/Name	)	Adopted Budget 2024-2025	7	ctual TD 4-2025		roposed Budget 025-2026
	REVENUES/OTHER SOURCES				,		
334255	F LDOT road grant	\$	1,755,780	\$	_	\$	676,972
334304	MLK Park Grant		250,000		-		-
	TOTAL CAPITAL PROJECTS	-				<u> </u>	
	REVENUES	\$	2,005,780	\$	_	\$	676,972

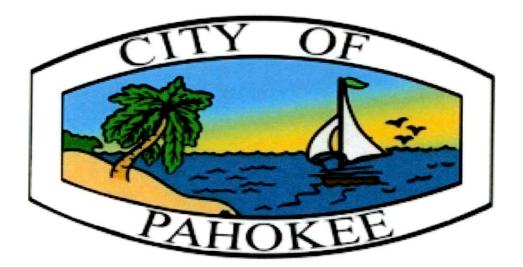
Section H, Item 2.

# City of Pahokee, Florida Schedule of Expenses For The Fiscal Year Ending September 30, 2026

# Fund 330 Capital Project Fund

Object#	Account Number/Name	2	Adopted Budget 2024-2025	2	Actual Budget 024-2025	Proposed Budget 025-2026
600 600 600	Capital Outlay (FDOT Road Project) Barfield Hwy Capital Outlay FDOT -McClure Capital Outlay Street/Roads Resurfacing	\$	1,755,780 - -	\$	722,695	\$ - 466,972 210,000
623	MLK Park  TOTAL OPERATING EXPENSE		250,000 <b>2,005,780</b>		13,300 <b>735,995</b>	 676,972
	*Total Captial Project Fund	\$	2,005,780	\$	735,995	\$ 676,972

# Marina Fund



# Fund 445 - Marina & Campground

### As 4/2025

			Adopted Budget		Adopted Budget		Actual ŸTD		roposed Budget
Object #	Account Number/Name	2024-2025		2024-2025 2024-2025		2025-2026			
347510	Marina Campground Revenue	\$	184,223	\$	111,592	\$	200,000		
347520	Marina Revenues - Laundry		1,457		300		1,000		
347530	Marina Deposits		15,731		409		10,000		
362350	Rental Marina Area		10,000		1,050		5,000		
	Subtotal - Marina Revenues		211,411		113,351		216,000		
381001	Interfund transfer - General Fund		172,977		-		161,031		
	TOTAL MARINA & CAMPGROUND REVENUES/OTHER SOURCES	\$	384,388	\$	113,351	\$	377,031		

# City of Pahokee, Florida Schedule of Expenses

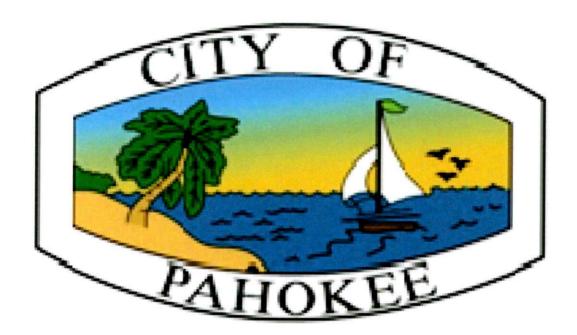
# For The Fiscal Year Ending September 30, 2026

# Dept 575000 Marina & Campground

As 4/2025

		As 4/2025		
		Adopted	Actual	Proposed
		Budget	YTD	Budget
Object #	Account Number/Name	2024-2025	2024-2025	2025-2026
110/120	Regular Salaries & Wages	\$ 22,506	\$ 12,758	\$ 23,182
130	COLA	-	-	1 - 1
	3% Cost of Living Increase	675	-	696
110/120/130	Regular Salaries & Wages	23,181	12,758	23,878
210	FICA Taxes	1,773	863	1,827
220	FLC Ret 3%	695	383	716
221	FLC Ret 4.35%	1,008	555	1,039
230	Life and Health Insurance	6,400	3,192	5,400
	TOTAL PERSONNEL SERVICE	33,057	17,751	32,860
210	n ( · 1n	1 500		
310	Professional Fees	1,700	1,742	2,000
311	Drug Testing	100	-	100
320	Accounting & Auditing	500	-	500
354	Permits	1,200	295	1,000
410	Communications Local Services	2,000	909	2,000
413	Communications Long Distance	200	-	200
415	Internet Services	5,000	2,716	6,000
431	Electric Services	62,000	33,568	67,000
432	Water, Sewer & Solid Waste	90,000	49,527	92,000
434	East Beach Water Assessment	2,000	980	2,000
436	Solid Waste Assessment	13,000	10,438	15,000
444	DNR Annual Adm Fee	400	-	450
450	General Liability Insurance	3,076	( 1,773	3,076
452	Property Insurance	32,645	14,381	32,645
461	Repair/Maintenance ,	85,000	43,586	85,000
490	Advertising	4,500	-	2,500
492 <sup>-</sup>	Bank Charges/Fees	1,400	962	1,400
499	Annual Fire Safety	5,000	593	5,000
510	General Office Supplies	1,500	-	1,000
515	Dues	300	-	300
520	Operating Supplies	34,000	10,919	25,000
640	Equipment	810	-	
(00	TOTAL OPERATING EXPENSE	346,331	172,389	344,171
600	Capital Outlay	5,000	-	-
	TOTAL CAPITAL OUTLAY	5,000	400.1	
	Sub-Total Marina Expenditures	384,388	190,140	377,031
	*Total Marina & Campground Expenses	\$ 384,388	\$ 190,140	\$ 377,031

# Cemetery Fund



### Fund 450 - Cemetery

As 4/2025

		Adopted	Actual	Decreal
		_		Proposed
Object#	A constant North and (NY and a	Budget	YTD	Budget
Object#	Account Number/Name	2024-2025	2024-2025	2025-2026
346920	Pre-Need Prepetual Care	2,400	3,600	2,400
346921	Perpetual Care Fees	13,000	7,000	13,000
361010	Restricted Interest- Perpetual	69	-	69
363653	Pre-Need Open/Closing	3,394	3,045	3,394
363654	Private Openings and Closing	43,000	27,895	43,000
364111	Sale of Cemetery Lot- Private	36,000	24,200	36,000
364112	Sale of Cemetery Lot- PreNeed	7,000	17,600	7,000
364120	Pre- Need Vault Sale	2,400	1,700	2,400
364121	Sale of Vault Liners- Private	20,000	16,270	20,000
364123	Sale of Vault Liners- PreNeed	4,333	-	4,333
364130	Marker Installation- Private	500	175	500
364132	Vault Service	1,286	1,200	1,286
364150	Cremation Fees	2,000	500	2,000
364171	Sale of Memorials- At Need	1,704	-	1,704
364172	Sale of Memorial- PreNeed	500	_	500
364181	Sale of Crypts-At Need	8,000	2,595	8,000
364182	Sale of Crypts - Preneed	8,000	3,995	8,000
369042	Cemetery Land Lease Income	3,888	2,268	3,888
369098	Other Miscellaneous Revenues	200	250	200
	Subtotal - Cemetery Revenues	157,674	112,293	157,674
381001	Interfund transfer in-From General Fund	33,952	-	46,752
		-		
381100	Interfund Trns In- Henderson	26,000	10,863	24,000
	Total Cemetery Revenues/Other Sources	\$ 217,626	\$ 123,156	\$ 228,426

¥

### Dept 539000 Cemetery

As 4/2025

		As 4/2025		
		Amended	Actual	Proposed
		Budget	YTD	Budget
Object #	Account Number/Name	2024-2025	2024-2025	2025-2026
110/120/130	Regular Salaries & Wages	\$ 83,450	47,426	\$ 85,946
130	COLA	_	i -	-
	3% Cost of Living Increase	2,504	-	2,578
110/120/130	Regular Salaries & Wages	85,954	47,426	88,524
210	FICA Taxes	6,575	3,557	6,772
220	FLC Ret 3%	2,579	1,423	2,656
221	FLC Ret 4.35%	3,739	2,063	3,851
230	Life and Health Insurance	11,500	12,059	19,344
240	Worker's Compensation	15,110	8,814	15,110
	TOTAL PERSONNEL SERVICE	125,457	75,342	136,257
320	Accounting & Auditing	4,500	-	4,500
360	Travel & Per Diem	500	-	500
410	Communications - Local Servi	8,000	1,413	8,000
413	Communications - Long Distan	400	-	400
415	Internet Service	1,000	505	1,000
420	Postage	200	-	200
431	Electric Service	2,500	984	2,500
432	Water, Sewer & Solid Waste	2,500	1,117	2,500
442	License	100	-	100
450	General Liability Insurance	9,227	5,319	9,227
451	Auto Liability Insurance	1,191	581	1,191
452	Property Insurance	5,761	2,538	5,761
461	Repair/Maintenance	13,000	2,916	13,000
510	General Office Supplies	4,000	1,835	,4,000
520	Operating Supplies	3,700	1,100	3,700
524	Fuel	9,000	2,388	9,000
525	Chemicals	370	-	370
526	Small Equipment	1,000	-	1,000
528	Uniforms	420	144	420
551	COS Markers (Memorial Sales)	8,000	-	8,000
552	COS Lot Markers	1,000	-	1,000
553	COS Vault Liners	14,500	11,785	14,500
559	Books & Subscriptions	300	560	300
561	Conference registration	1,000	-	1,000
	TOTAL OPERATING EXPENSE	92,169	33,185	92,169
	*Total Cemetery Expenses	\$ 217,626	\$ 108,527	\$ 228,426



### **AGENDA**

#### **MEMORANDUM**

TO: Honorable Mayor & City Commissioners

VIA: Michael E. Jackson, City Manager

FROM: Offices of the City Manager and City Clerk

SUBJECT: City of Pahokee's Continuing Consent to Inclusion in PBC Fire Rescue

Municipal Service Taxing Units (MSTU)

DATE: August 26, 2025

### **GENERAL SUMMARY/BACKGROUND:**

Florida Statutes §125.01(1)(q) authorizes counties to establish Municipal Service Taxing Units (MSTUs) to provide essential services such as fire-rescue, and §125.01(1)(r) allows municipalities to be included with the municipality's consent by ordinance.

Palm Beach County established the Fire/Rescue MSTU to provide regional fire protection, advanced life support, fire prevention, fire code enforcement, and related services. The City of Pahokee initially consented to inclusion in the Fire/Rescue MSTU through Ordinance No. 2005-06, which was extended by subsequent City action and County boundary ordinances. In 2016, Ordinance No. 2016-09 extended the City's consent through December 31, 2025, with services continuing through October 1, 2026, 7:30 a.m. to allow for completion of the 2025 tax year funding cycle.

The proposed ordinance continues the City's participation for an additional ten (10) years (December 31, 2025 – December 31, 2035), ensuring uninterrupted services through October 1, 2036.

### **BUDGET IMPACT:**

The City will continue funding fire-rescue services through the MSTU ad valorem millage set by Palm Beach County. No new or additional local funding obligations are imposed on the City under this ordinance.

### **LEGAL NOTE:**

Defer to the City Attorney.

### **STAFF RECOMMENDATION:**

Inclusion in the County's Fire/Rescue MSTU allows the City to maintain reliable, professional fire-rescue services without bearing the significant financial and operational burden of establishing and staffing its own municipal fire department. Staff recommends approval of the item.

### **ATTACHMENTS:**

Ordinance 2025-01

### ORDINANCE NO. 2025-01

AN ORDINANCE OF THE CITY OF PAHOKEE, FLORIDA; PROVIDING FOR THE CITY'S CONSENT TO THE INCLUSION OF THE ENTIRE TERRITORY WITHIN THE CITY OF PAHOKEE'S MUNICIPAL BOUNDARIES INTO PALM BEACH COUNTY'S FIRE/RESCUE MUNICIPAL SERVICE TAXING UNIT FOR FIRE-RESCUE, FIRE PROTECTION, ADVANCED LIFE SUPPORT (OR SIMILAR EMERGENCY SERVICES), FIRE CODE ENFORCEMENT AND INCIDENTAL OTHER **NECESSARY** PROVIDING FOR INCORPORATION; PROVIDING FOR INTENT, PURPOSE AND CONSENT; PROVIDING FOR EFFECTIVENESS AND DURATION OF CONSENT; PROVIDING FOR EFFECTIVENESS OF REPEAL; ACKNOWLEDGING AD VALOREM MILLAGE RATE LIMITATION; PROVIDING FOR REPEAL OF CONFLICTING ORDINANCES; PROVIDING FOR SEVERABILITY; PROVIDING FOR CODIFICATION; PROVIDING FOR CAPTIONS; AND PROVIDING FOR EFFECTIVE DATE.

WHEREAS, pursuant to Section 125.01(1)(q) and (r), Florida Statutes, the Florida Legislature has empowered counties to establish Municipal Service Taxing Units ("MSTU"s), whereby a county may levy a tax within the MSTU for certain essential municipal services, including the provision of fire-rescue services; and

**WHEREAS**, pursuant to Section 125.01(1)(q), Florida Statutes, a municipality may be included within an MSTU, subject to approval by ordinance of the governing body of the municipality giving consent either annually or for a term of years; and

WHEREAS, Palm Beach County ("County") established an MSTU known as the Fire/Rescue MSTU to provide fire protection, fire rescue, advanced life support (or similar emergency services), fire code enforcement and other services necessary and incidental to the purpose for which the Fire/Rescue MSTU was created; and

WHEREAS, the City of Pahokee ("City") by Ordinance No. 2005-06 consented to its inclusion in the County's Fire/Rescue MSTU for a ten year term through December 31, 2015, as a mechanism to receive and fund County fire-rescue services through September 30, 2016; and

WHEREAS, the County by Ordinance No. 2005-064 amended the boundaries of Page 1 of 5 (Ord 2025-01)

the Fire/Rescue MSTU to include the City for the duration of the term identified in City Ordinance No.2005-06, as such term may be extended by the City from time to time; and

WHEREAS, City Ordinance No. 2016-09 affirmed, continued and extended the City's consent and inclusion in the County's Fire/Rescue MSTU through December 31, 2025, and further provided that said consent and inclusion shall be deemed to continue through 7:30 a.m. on October 1, 2026, to the extent necessary to enable the County to provide within the City fire-rescue and related services funded by tax year 2025, including but not limited to the enforcement of the Fire Code and any other applicable laws and regulations; and

WHEREAS, the City Commission hereby desires to extend, for an additional ten (10) year period from December 31, 2025, through December 31, 2035, its consent to the inclusion of all the territory lying within the municipal boundaries of the City into the County's Fire/Rescue MSTU for County fire-rescue and related services within the City from October 1, 2026, until 7:30 a.m. on October 1, 2036, and believes that such inclusion is in the best interest of the health, safety and welfare of the citizens of the City.

# NOW, THEREFORE, BE IT ORDAINED BY THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, THAT:

**Section 1. Incorporation.** The above recitals are herein incorporated by reference.

Section 2: Intent, Purpose and Consent: It is the intent, purpose, and effect of this Ordinance to comply with the provisions of Section 125.01(1)(q), Florida Statutes. The City Commission hereby extends and consents to the inclusion of all territory within the incorporated municipal boundaries of the City, as may be amended from time to time, within the County's Fire/Rescue Municipal Service Taxing Unit (the "Fire/Rescue MSTU"), which was established pursuant to enabling legislation adopted by the Board of County Commissioners of Palm Beach County. The purpose of the enactment of this Ordinance is to extend the City's consent to be included in the County's Fire/Rescue

MSTU in order to enable the County to fund and provide fire-rescue and related services within the territorial limits of the City including, but not limited to, the County's enforcement of the Florida Fire Prevention Code and Palm Beach County Local Amendments thereto (collectively "Fire Code") and any other laws and regulations applicable within the Fire/Rescue MSTU.

Section 3: Effectiveness and Duration of Consent: The City's consent to be included in the Fire/Rescue MSTU is hereby extended effective from December 31, 2025, to be implemented for tax year 2026 in order to fund and provide County fire-rescue and related services within the City as of October 1, 2026, and to provide for the City's continuing inclusion in the Fire/Rescue MSTU without interruption. The City's consent to be included in the County's Fire/Rescue MSTU shall continue from December 31, 2025, for a term of ten (10) years through December 31, 2035; provided, however, that the City's consent and inclusion in the County's Fire/Rescue MSTU shall be deemed to continue through 7:30 a.m. on October 1, 2036, to the extent necessary to enable the County to provide within the City fire-rescue and related services funded by the final tax year including, but not limited to, the County's enforcement of the Fire Code and any other laws and regulations applicable within the Fire/Rescue MSTU.

Section 4: Effectiveness of Repeal: Should the City intend to repeal its consent to be included in the Fire/Rescue MSTU prior to its expiration on December 31, 2035, the City shall provide written notice to the County, by March 1st of any given year, of the City's intent to repeal this Ordinance and the consent provided herein effective December 31st of the same year. The County will then adopt an ordinance to remove the City from the Fire/Rescue MSTU as of said December 31st. The City shall adopt an ordinance to repeal this Ordinance and the consent provided herein, and shall provide a certified copy of the repealing ordinance to the County and to the Property Appraiser, by said December 31st. The City's inclusion in the County's Fire/Rescue MSTU shall terminate on said December 31st; provided, however, that the City's inclusion in the County's Fire/Rescue MSTU shall be deemed to continue through the following October

1st at 7:30 a.m. to the extent necessary to enable the County to provide within the City fire-rescue and related services funded by the final tax year, including, but not limited to, the County's enforcement of the Fire Code and any other laws and regulations applicable within the Fire/Rescue MSTU.

Section 5: Ad Valorem Millage Rate Limitation: The City acknowledges that by opting into the Fire/Rescue MSTU, it cannot levy an annual ad valorem millage rate that would exceed the ten (10) mill cap for municipal purposes when combined with the Fire/Rescue MSTU's annual ad valorem millage rate.

Section 6: Repeal of Conflicting Ordinances: All other City ordinances and parts of ordinances in conflict with any provisions of this Ordinance are hereby repealed to the extent of the conflict. Notwithstanding the above, Ordinance No. 2016-09 shall not be deemed repealed by this Ordinance and shall expire as provided for therein; provided, however, that Ordinance No. 2016-09 and the term of consent identified therein shall be deemed to be extended to the extent necessary to enable the County to provide within the City fire-rescue and related services funded by the final tax year thereunder.

<u>Section 7:</u> <u>Severability:</u> If any section, paragraph, sentence, clause, phrase, or word of this Ordinance is for any reason held by a court of competent jurisdiction to be invalid, unconstitutional, inoperative or void, such holding shall not affect the remainder of this Ordinance.

<u>Section 8:</u> <u>Codification:</u> The provisions of this Ordinance shall become and be made a part of the code of ordinances of the City. The sections of this Ordinance may be renumbered or re-lettered to accomplish such, and the word "ordinance" may be changed to "section", "article", or other appropriate word.

<u>Section 9:</u> <u>Captions:</u> The captions, section headings, and section designations used in this Ordinance are intended only for the convenience of users and shall have no effect on the interpretation of the provisions of this Ordinance.

<u>Section 10</u>: <u>Effective Date</u>: This Ordinance shall be effective December 31, 2025. Notwithstanding anything here to the contrary, the City's continuing

participation in the Fire/Rescue MSTU is contingent upon the County maintaining an ordinance including the City within the Fire/Rescue MSTU.

FIRST READING this 8th day of September, 2025.

**APPROVED AND ADOPTED ON SECOND READING** by the City Commission of the City of Pahokee, Florida, on this <u>23rd</u> day of September, 2025.

	Keith W. Babb, Jr., Mayor
ATTEST:	·
Nylene Clarke, CMC, City Clerk	
APPROVED AS TO FORM AND LEGAL SUFFICIENCY:	
Burnadette Norris-Weeks, P.A. City Attorney	
Moved by:	
Seconded by:	
Vice Mayor Cowan-Williams  Commissioner McDonald  Commissioner McPherson	(Yes) (No) (Yes) (No) (Yes) (No) (Yes) (No) (Yes) (No)

Page 5 of 5 (Ord 2025-01)



### **AGENDA**

### **MEMORANDUM**

TO: Honorable Mayor & City Commissioners

VIA: Michael E. Jackson, City Manager

FROM: Staff

SUBJECT: Observed Holidays for Fiscal Year 2025-2026

DATE: September 17, 2025

### **GENERAL SUMMARY/BACKGROUND:**

The City of Pahokee adopts an annual schedule of observed holidays by resolution, during the budget process. For Fiscal Year (FY) 2025-2026, staff is proposing the observance of the same holidays as those approved and observed during FY 2024-2025, with exception of including the Friday after Christmas and New Year, respectively.

### **BUDGET IMPACT:**

Defer to Finance.

### **LEGAL NOTE:**

Defer to City Attorney.

### **STAFF RECOMMENDATION:**

Staff recommends approval of the item.

### <u>ATTACHMENTS</u>:

Resolution 2025-56

#### **RESOLUTION 2025-56**

A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA APPROVING THE OBSERVED HOLIDAYS FOR FISCAL YEAR 2025/2026, AS SET FORTH ON EXHIBIT "A"; PROVIDING FOR ADOPTION OF REPRESENTATIONS; PROVIDING FOR AN EFFECTIVE DATE.

WHEREAS, the City Commission of the City of Pahokee, Florida ("City Commission") adopts a holiday schedule for the City of Pahokee, for Fiscal Year 2025/2026; and

**WHEREAS,** the City Commission desires to adopt the holidays to be observed by the City that are attached hereto in Exhibit "A".

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, AS IT FOLLOWS:

<u>Section 1.</u> <u>Adoption of Representations.</u> The foregoing "Whereas" clauses are hereby ratified and confirm as being true, and the same are hereby made a specific part of this resolution.

<u>Section 2.</u> <u>Authorization and Approval.</u> The City Commission of the City of Pahokee hereby adopts the Observed Holidays for Fiscal Year 2025/2026 set forth on Exhibit "A".

<u>Section 3.</u> <u>Authorizing the City Manager</u>. The City Manager is hereby authorized to take all necessary and expedient action to effectuate the intent of this Resolution.

<u>Section 4.</u> <u>Effective Date.</u> This Resolution shall be effective immediately upon its passage and adoption.

PASSED and ADOPTED this 23rd day of September 2025.

ATTEST	Keith W. Babb, Jr., Mayor
Nylene Clarke, CMC, City Clerk	

### APPROVED AS TO FORM AND LEGAL SUFFICIENCY:

Burnadette Norris-Weeks, P.A. City Attorney		
Moved by:		
Seconded by:		
VOTE:		
Mayor Babb	(Yes)	(No)
Vice Mayor Cowan-Williams	(Yes)	(No)
Commissioner McDonald	(Yes)	(No)
Commissioner McPherson	(Yes)	(No)
Commissioner Scott	(Yes)	(No)

### EXHIBIT "A"

# OBSERVED HOLIDAYS FOR FISCAL YEAR 2025/2026

Columbus Day	October 13, 2025 (*Floating)
Veterans Day	November 11, 2025
Thanksgiving	November 27 & 28, 2025
Christmas	December 24-26, 2025
New Year	December 31, 2025 - January 2, 2026
Martin Luther King Jr. Day	January 19, 2026
Presidents' Day	February 16, 2026
Memorial Day	May 25, 2026
Juneteenth Day	June 19, 2026
Independence Day	July 3 & *6, 2026 (*Floating)
Labor Day	September 7, 2026



### **AGENDA**

#### **MEMORANDUM**

TO: Honorable Mayor & City Commissioners

VIA: Michael E. Jackson, City Manager

FROM: Office of the City Manager

SUBJECT: Twentieth Addendum to the Law Enforcement Service Agreement

DATE: September 18, 2025

### **GENERAL SUMMARY/BACKGROUND:**

On February 12, 2006, the City of Pahokee and Rick L. Bradshaw, Sheriff of Palm Beach County, Florida entered into an agreement for the provision of law enforcement services to the City. The proposed Twentieth Addendum amends the total amount due for services for the period beginning October 1, 2025 and ending on September 30, 2026. In all other respects and unless otherwise stated, the terms and conditions of the Agreement, which includes prior Addendums, shall continue unchanged and in full force and effect.

### **BUDGET IMPACT:**

Per the proposed agreement, the total cost of personnel and equipment shall be increased to \$630,297.00. Monthly payments shall be \$52,524.75. Additional law enforcement services shall be compensated at a rate of \$132.00 per hour for a deputy and \$172.00 per hour for a sergeant and will be billed to the City on a monthly basis.

The difference in the total cost of services from FY 2025 and FY 2026, is an approximate three percent (3%) increase of \$18,358.00.

### **LEGAL NOTE:**

Defer to City Attorney.

### STAFF RECOMMENDATION:

Staff recommends approval of the item.

### **ATTACHMENTS:**

Resolution 2025-57

#### **RESOLUTION 2025-57**

A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, AUTHORIZING THE MAYOR TO EXECUTE THE TWENTIETH ADDENDUM TO THE LAW ENFORCEMENT SERVICE AGREEMENT BETWEEN THE CITY OF PAHOKEE AND RICK L. BRADSHAW, SHERIFF OF PALM BEACH COUNTY, FLORIDA, ATTACHED HERETO AS EXHIBIT "A"; PROVIDING FOR ADOPTION OF REPRESENTATIONS; PROVIDING FOR AN EFFECTIVE DATE.

WHEREAS, the City of Pahokee, Florida (the "City") and Rick L. Bradshaw, Sheriff of Palm Beach County, Florida (the "Sheriff") executed a Law Enforcement Service Agreement effective February 12, 2006; and

WHEREAS, the City and Sheriff executed the First Addendum effective June 16, 2006; the Second Addendum effective October 01, 2007; a Third Addendum effective October 01, 2008; a Fourth Addendum effective October 01, 2009; a Fifth Addendum effective October 01, 2010; a Sixth Addendum effective October 01, 2011; a Seventh Addendum effective October 01, 2012; an Eighth Addendum effective October 01, 2013; a Ninth Addendum effective October 01, 2014; a Tenth Addendum effective October 1, 2015; an Eleventh Addendum effective October 01, 2016; a Twelfth Addendum effective October 01, 2017; a Thirteenth Addendum effective October 01, 2018; a Fourteenth Addendum effective October 01, 2019; a Fifteenth Addendum effective October 01, 2021; a Seventeenth Addendum effective October 01, 2022; an Eighteenth Addendum effective October 01, 2023; and a Nineteenth Addendum effective October 01, 2024, (the "Agreement"); by which the Sheriff agreed to perform law enforcement services; and

**WHEREAS**, the City and Sheriff now desire to enter into a Twentieth Amendment to the Agreement to increase the monthly costs from \$50,994.92 to \$52,524.75, for the provision of law enforcement services; and

**WHEREAS**, the total cost of personnel and equipment shall be \$630,297.00 and monthly payments shall be \$52,524.75; and

WHEREAS, additional law enforcement services shall be compensated at a rate of \$132.00 per hour for a deputy and \$172.00 per hour for a sergeant and will be billed by the Sheriff to the City on a monthly basis; and

**WHEREAS**, the City Commission of the City of Pahokee ('City Commission") deems that entering into the Twentieth Addendum is in the best interest of the City of Pahokee and its residents.

# NOW, THEREFORE, BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, AS IT FOLLOWS:

<u>Section 1.</u> <u>Adoption of Representations.</u> The foregoing "Whereas" clauses are hereby ratified and confirm as being true, and the same are hereby made a specific part of this resolution.

<u>Section 2.</u> <u>Authorization and Approval.</u> The City Commission of the City of Pahokee hereby approves the Agreement and authorizes the Mayor to enter into the Twentieth Addendum to the Law Enforcement Service Agreement between the City of Pahokee and Rick L. Bradshaw, Sheriff of Palm Beach County, Florida, attached hereto as Exhibit "A." The City Manager is further authorized to take all necessary and expedient action to effectuate the intent of this Resolution.

<u>Section 3.</u> <u>Effective Date.</u> This Resolution shall be effective immediately upon its passage and adoption.

**PASSED** and **ADOPTED** this <u>23rd</u> day of September 2025.

	Keith W. Babb, Jr., Mayor
ATTEST:	
Nylene Clarke, CMC, City Cler	·k
APPROVED AS TO FORM A	ND LEGAL SUFFICIENCY:
Burnadette Norris-Weeks, P.A.	

City Attorney

Moved by:		
Seconded by:		
VOTE:		
Mayor Babb	(Yes)	(No)
Vice Mayor Cowan-Williams	(Yes)	(No)
Commissioner McDonald	(Yes)	(No)
Commissioner McPherson	(Yes)	(No)
Commissioner Scott	(Ves)	(No)

### EXHIBIT "A"

# TWENTIETH ADDENDUM TO THE LAW ENFORCEMENT SERVICE AGREEMENT

# TWENTIETH ADDENDUM TO THE LAW ENFORCEMENT SERVICE AGREEMENT SHERIFF RIC L. BRADSHAW AND THE CITY OF PAHOKEE

This Twentieth Addendum to the Law Enforcement Service Agreement is made by and between The City of Pahokee (hereinafter referred to as "City"), and Ric L. Bradshaw, Sheriff of Palm Beach County, Florida (hereinafter referred to as "Sheriff"). The City and the Sheriff shall hereinafter be referred to as the "Parties."

WHEREAS, the Parties executed a Law Enforcement Service Agreement effective February 12, 2006, a First Addendum effective June 16, 2006, Second Addendum effective October 01, 2007, a Third Addendum effective October 01, 2008, a Fourth Addendum effective October 01, 2009, a Fifth Addendum effective October 01, 2010, a Sixth Addendum effective October 01, 2011, a Seventh Addendum effective October 01, 2012, an Eighth Addendum effective October 01, 2013, a Ninth Addendum effective October 01, 2014, a Tenth Addendum effective October 01, 2015, and an Eleventh Addendum effective October 01, 2016, a Twelfth Addendum effective October 01, 2017, a Thirteenth Addendum effective October 01, 2018, a Fourteenth Addendum effective October 01, 2020, a Sixteenth Addendum effective October 01, 2021, a Seventeenth Addendum effective October 01, 2022, an Eighteenth Addendum effective October 01, 2023, and a Nineteenth Addendum effective October 01, 2024, (the "Agreement"), by which the Sheriff agreed to perform law enforcement services; and

**WHEREAS**, the Parties wish to set forth the consideration for the second year of the extended contract term and amend language for additional law enforcement services.

**NOW, THEREFORE,** in consideration of the mutual covenants herein contained the receipt and sufficiency of which are hereby acknowledged, it is agreed upon as follows:

- 1. Article 6 Section 6.1 of the Law Enforcement Service Agreement is amended as to the total amount due for services for the period beginning October 01, 2025 through September 30, 2026, as follows: The total cost of personnel and equipment shall be \$630,297.00. Monthly payments shall be \$52,524.75.
- 2. Article 6, Section 6.5, regarding additional law enforcement services of the Law Enforcement Service Agreement is amended and shall now read as follows: Additional law enforcement services shall be compensated at a rate of \$132.00 per hour for a deputy and \$172.00 per hour for a sergeant and will be billed by the SHERIFF to the CITY on a monthly basis. This rate is subject to annual review and change upon agreement between the CITY and SHERIFF.
- 3. In all other respects and unless otherwise stated, the terms and conditions of the Agreement, which includes prior Addendums, shall continue unchanged and in full force and effect.

**IN WITNESS WHEREOF**, the Parties hereto have executed the Addendum to the Agreement as of the last date all signatures below are affixed.

PALM BEACH COUNTY SHERIFF'S OFFICE	CITY OF PAHOKEE					
BY: Ric L. Bradshaw, Sheriff	BY:					
Title: Sheriff	Print Name: Keith W. Babb, Jr.					
	Title: Mayor					
Witness: Tristram R. Moore, Major	Attest: Nylene Clark, City Clerk					
DATE:	DATE:					



#### **AGENDA**

#### **MEMORANDUM**

TO: Honorable Mayor & City Commissioners

VIA: Michael E. Jackson, City Manager

FROM: Human Resources

SUBJECT: Property & Casualty Proposed Renewal

DATE: September 18, 2025

#### **GENERAL SUMMARY/BACKGROUND:**

The City of Pahokee is in need to renew their insurance coverage for General liability, property, auto liability and employee workers comp coverage. Brown and Brown renewal quote for this coming fiscal year has come in at \$376,405.00 at a savings of \$27, 785.00 compared to the prior year's annual premium (\$404, 190.00). The City Manager would like to request authorization to move forward with the renewal of our Property and Casualty insurance coverage with our current carrier.

#### **BUDGET IMPACT:**

Yes

#### **LEGAL NOTE:**

We yield to the City Attorney for legal form

#### STAFF RECOMMENDATION:

Staff recommend that we accept the rate of \$376,405.00 that has been quoted and move forward with renewing these coverages for the upcoming fiscal year effective October 1, 2025.

#### **ATTACHMENTS:**

Resolution 2025-58

#### **RESOLUTION 2025-58**

A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, APPROVING THE ACCEPTANCE OF THE GENERAL LIABILITY, PROPERTY & CASUALTY COVERAGES, LIABILITY AUTO AND WORKERS COMPENSATION **PACKAGE FORTH** SET IN **EXHIBIT** "A" **HERETO**; AUTHORIZING THE CITY MANAGER TO TAKE NECESSARY ACTION; **PROVIDING FOR** ADOPTION REPRESENTATIONS; PROVIDING FOR AN EFFECTIVE DATE.

WHEREAS, the City of Pahokee, Florida ("City") is in need of securing various insurance coverages to include General liability, property and casualty coverage, automobile liability and employee workers compensation coverages; and

**WHEREAS**, the City Commission of the City of Pahokee ("City Commission") desires to approve the employee benefits package for the fiscal year 2025-2026 as researched and recommended by insurance advisors Brown & Brown; and

WHEREAS, Brown & Brown has submitted to the City Manger a renewal quote in the amount of \$376, 405.00, a saving of \$27, 785.00 compared to the prior year's annual premium \$404,190.00 and

**WHEREAS**, the City Commission desires to approve and accept the new quote for the upcoming fiscal year as shown in Exhibit "A" hereto; and

**WHEREAS**, the City Commission of the City of Pahokee ('City Commission") finds that acceptance of the new quote for the upcoming fiscal year is in the best interests of the City.

# NOW, THEREFORE BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA AS FOLLOWS:

- <u>Section 1.</u> <u>Adoption of Representations</u>. The foregoing "Whereas" clauses are hereby approved and confirmed as being true and the same are hereby made a specific part of this Resolution.
- Authorization of City Manager. The City Commission of the City of Pahokee approves the acceptance of the various insurance coverages to include: General liability, property & casualty coverages, automobile liability and employee workers compensation coverages, as set forth in the attached Exhibit "A" hereto. The City Manager is further authorized to take all necessary and expedient action to effectuate the intent of this Resolution.

Section 3.	Effective Date.	This Resolution	shall be effe	ective immedia	ately upon
	its passage and	adoption.			
PASSED an	d <b>ADOPTED</b> thi	s 23rd day of Sent	ember 2025		

Keith W. Babb, Jr., Mayor		
ATTEST:		
Nylono Clarko CMC City Clo		
Nylene Clarke, CMC, City Cle	ГK	
APPROVED AS TO FORM A LEGAL SUFFICIENCY:	AND	
Burnadette Norris-Weeks, P.A City Attorney		
Moved by:		
Seconded by:		
<u>VOTE:</u>		
Mayor Babb	(Yes)	
Vice Mayor Cowan-Williams		
Commissioner McDonald	(Yes)	(No)
Commissioner McPherson	(Yes)	(No)
Commissioner Scott	(Yes)	(No)

# EXHIBIT "A"

## **Explanation of Insurance**

(attached)



### **Coverage & Premium Comparison**

			2024/2025				2025/2026				Changes ir	n Exposures	
LINE OF COVERAGE		LIMIT	DEDUCTIBLE/SIR		ANNUAL PREMIUM		LIMIT	DEDUCTIBLE/SIR		NNUAL REMIUM	2024/2025	202	25/2026
Property:													
Preferred Governmental Insurance Trust	Blan	ket Limit				Blaı	nket Limit						
Blanket Buildings & Contents	\$	15,547,093	\$ 5,000	\$	143,209	\$	15,547,093	\$ 5,000	\$	135,975	Pro	perty	
Equipment Breakdown	\$	15,547,093	\$ 5,000			\$	15,547,093	\$ 5,000			Exposure	\$	-
Excess Flood	\$	5,000,000	\$5,000 Exc Zones A, V			\$	5,000,000	\$5,000 Exc Zones A, V			Difference		0.00%
Earth Movement	\$	5,000,000	\$ 5,000			\$	5,000,000	\$ 5,000					
Terrorism		Not Included	N/A				Not Included	N/A			Premium	\$	(7,234)
Named Windstorm	\$	15,547,093	5% / \$35,000 Minimum			\$	15,547,093	5% / \$35,000 Minimum			Difference		-5.05%
Additional Expense	\$	1,000,000				\$	1,000,000	\$ 5,000					
Business Income	\$	500,000				\$	500,000	\$ 5,000					
Errors & Omissions	\$	250,000				\$	250,000						
Demolition & Increased Cost of Construction	\$	500,000	\$ 5,000			\$	500,000	\$ 5,000					
Inland Marine:											Inland	Marine	)
Unscheduled Blanket Inland Marine	\$	500,000	\$ 1,000	\$	1,808	\$	500,000	\$ 1,000	\$	1,808	\$526,000	\$5	26,000
Communications Equipment	\$	26,000	\$ 1,000			\$	26,000	\$ 1,000					
Mobile Equipment	Incl	uded in Blanket	\$ 1,000			Inc	luded in Blanket	\$ 1,000			Exposure	\$	-
Electronic Data Processing	Incl	uded in Blanket	\$ 1,000			Inc	luded in Blanket	\$ 1,000			Difference		0.00%
Emergency Services Portable Equip	Incl	uded in Blanket	\$ 1,000			Inc	luded in Blanket	\$ 1,000					
Fine Arts	Incl	uded in Blanket	\$ 1,000			Inc	luded in Blanket	\$ 1,000			Premium	\$	-
Other Inland Marine	Incl	uded in Blanket	\$ 1,000			Inc	luded in Blanket	\$ 1,000			Difference		0.00%
Rented Borrowed Leased Equipment		Not Included	N/A				Not Included	N/A					
Valuable Papers	Incl	uded in Blanket	\$ 1,000			Inc	luded in Blanket	\$ 1,000					
Watercraft		Not Included	N/A				Not Included	N/A					
											Premium	\$	(7,234)
			Sub-Total	\$	145,017			Sub-Total	\$	137,783	Difference		-4.99%
Crime:													
Preferred Governmental Insurance Trust													
Employee Dishonesty	\$	500,000	\$ 1,000	\$	1,800	\$	500,000	\$ 1,000	\$	1.884			
Theft, Disappearance & Destruction In/Out	\$	500,000			.,	\$	500,000		7	1,001			
Funds Transfer	\$	500,000				\$	500,000						
Computer Fraud	\$	500,000				\$	500.000						
Forgery/Alterations	\$	500,000				\$	500.000	, , , , , , , , , , , , , , , , , , , ,			Premium	\$	84
	1	,	Sub-Total	\$	1,800	Ħ	,	Sub-Total	\$	1.884	Difference		4.67%
General Liability:					1,000				,	1,001		/roll	
Preferred Governmental Insurance Trust						t					\$1,994,726		944,940
General Liability	\$	2,000,000		\$	78,243	\$	2,000,000		\$	80,109	Exposure	\$	(49,786)
Employee Benefits	\$	2,000,000	<del>-</del>	Ψ	70,243	\$	2,000,000	_	Ψ	00,109	Difference	Ψ	-2.50%
Deadly Weapon Protection	\$	1,000,000			Included	\$	1,000,000			Included		\$	1,866
Deadly Weapon't Tolection	Ψ	1,000,000	Sub-Total	¢	78,243	Ψ	1,000,000	Sub-Total	¢	80,109	Premium Difference	Ψ	2.38%
A l. !!	_		Sub-10tai	Ψ	10,243	-		Sub-10tai	Ψ	80,109			2.30 /0
Automobile:	_											icles	00
Preferred Governmental Insurance Trust	_	0.000.000		•	40.001		0.000.000	Τ	•	44.400	22	.,	22
Auto Liability	\$	2,000,000	-	\$	13,204	\$	2,000,000	-	\$	14,469		IV	
Uninsured Motorist	1	Not Included	N/A			_	Not Included	N/A			\$362,989	\$3	62,989
Comprehensive/Collision	1_	Symbol 2, 8		\$	3,391	Ļ	Symbol 2, 8		\$	3,553	Exposure		0%
Hired Physical Damage	\$	35,000	\$ 1,000			\$	35,000	\$ 1,000			Difference		0.00%
	1					<u> </u>					Premium	\$	1,427
			Sub-Total	\$	16,595	<u> </u>		Sub-Total	\$	18,022	Difference		8.60%

	2024/2025					2025/2026						Changes in Exposures			
LINE OF COVERAGE	LIMIT		D	EDUCTIBLE/SIR		ANNUAL PREMIUM		LIMIT	I	DEDUCTIBLE/SIR	-	ANNUAL PREMIUM	2024/2025	s	ection I, Item
Public Officials:													Pay	roll	
Preferred Governmental Insurance Trust													\$1,994,726	\$1	,944,940
Public Officials Liability	\$	2,000,000		-	\$	71,939	\$	2,000,000		-	\$	72,277	Exposure	\$	(49,786)
Employment Practices Liability	\$	2,000,000		-			\$	2,000,000		=			Difference		-2.50%
													Premium	\$	338
				Sub-Total	\$	71,939				Sub-Total	\$	72,277	Difference		0.47%
Cyber Liability:															
Preferred Governmental Insurance Trust															
Cyber Liability	\$	2,000,000	\$	25,000	\$	4,118	\$	2,000,000	\$	25,000	\$	4,324			
Privacy & Security Liability	\$	2,000,000	\$	25,000			\$	2,000,000	\$	25,000					
Cyber Extortion & Ransomware	\$	500,000	\$	25,000			\$	500,000	\$	25,000					
													Premium	\$	206
				Sub-Total	\$	4,118				Sub-Total	\$	4,324	Difference		5.00%
Workers' Compensation:												Pay	roll		
Preferred Governmental Insurance Trust			Expe	rience Mod: 1.67					Exp	erience Mod: 1.21			\$1,994,726	\$^	,944,940
													Exposure	\$	(49,786)
Workers' Compensation		Statutory			\$	86,478		Statutory	\$	=	\$	62,006	Difference		-2.50%
Employers Liability		\$1M/\$1M/\$1M				Included		\$1m/\$1m/\$1m	\$	-		Included	Premium	\$	(24,472)
				Sub-Total	\$	86,478	1			Sub-Total	\$	62,006	Difference		-28.30%
TOTAL PREMIUM					\$	404,190					\$	376,405			
										\$ Difference	\$	(27,785)			
										% Difference		-6.87%			



#### **AGENDA**

#### **MEMORANDUM**

TO: Honorable Mayor & City Commissioners

VIA: Michael E. Jackson, City Manager

FROM: Raquel Prince, Human Resources Director

SUBJECT: Employee benefits for Fiscal Year 2025-2026

DATE: September 9, 2025

#### **GENERAL SUMMARY/BACKGROUND:**

The City of Pahokee is in need to approve the employee benefits package for the upcoming fiscal year of 2025-2026. The Gehring Group, the city's current insurance broker, has requested a renewal quote from the city's current carriers. The quote that came back from our existing insurance carrier has an increase to Medical Coverage of 9.1% and 11.6% increase in Dental HMO coverage. Our Basic Life and Vision coverage will stay the same. Our vision will stay the same and the rates will be guaranteed for 2 years. City Manger would like to move forward with the above quote.

#### **BUDGET IMPACT:**

Yes

#### **LEGAL NOTE:**

We yield to City Attorney for legal form

#### **STAFF RECOMMENDATION:**

Staff recommend that we accept the rates that have been quoted and move forward with renewing these coverages for the upcoming fiscal year.

#### **ATTACHMENTS:**

Resolution 2025-59

#### **RESOLUTION 2025-59**

A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, APPROVING THE ACCEPTANCE OF THE EMPLOYEE BENEFITS PACKAGE WITH A 9.1% INCREASE IN MEDICAL COVERAGE AND A 11.6% INCREASE IN DENTAL INSURANCE COVERAGE, AS SET FORTH IN EXHIBIT "A" HERETO; AUTHORIZING THE CITY MANAGER TO TAKE NECESSARY ACTION; PROVIDING FOR ADOPTION OF REPRESENTATIONS; PROVIDING FOR AN EFFECTIVE DATE.

WHEREAS, the City of Pahokee, Florida ("City") is in need of setting the yearly benefits coverage for its employees; and

**WHEREAS**, the City Commission of the City of Pahokee "City Commission" desires to approve the employee benefits package for the fiscal year 2025-2026 as researched and recommended by the City's current agent of record, The Gehring Group, Inc.; and

WHEREAS, more specifically, The Gehring Group, Inc. has requested renewal quotes from the city's current carriers and there are nominal quoted increases for Medical Coverage of 9.1% and Dental Insurance coverage of 11.6%. Further, the quotes show that basic life insurance and vision insurance will remain at the same rates

**WHEREAS**, the City Commission desires to approve the increases and accept the new quotes for the upcoming fiscal year as shown in Exhibit "A" hereto; and

**WHEREAS**, the City Commission of the City of Pahokee ('City Commission") finds that acceptance of the new quotes for the upcoming fiscal year is in the best interests of the City.

# NOW, THEREFORE BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA AS FOLLOWS:

- <u>Section 1.</u> <u>Adoption of Representations</u>. The foregoing "Whereas" clauses are hereby approved and confirmed as being true and the same are hereby made a specific part of this Resolution.
- Authorization of City Manager. The City Commission of the City of Pahokee hereby approves the acceptance of the Employee Benefits Package with a 9.1% increase in medical coverage and a 11.6% increase in dental insurance coverage, as set forth in the attached Exhibit "A"

hereto. The City Manager is further authorized to take all necessary and expedient action to effectuate the intent of this Resolution.

<u>Section 3.</u> <u>Effective Date</u>. This Resolution shall be effective immediately upon its passage and adoption.

PASSED and ADOPTED this <u>23rd</u> day of September, 2025.

		Keith W. Babb, Jr., Mayor
ATTEST:		
Nylene Clarke, CMC, City Clerk		
APPROVED AS TO FORM AND LEGAL SUFFICIENCY:		
Burnadette Norris-Weeks, P.A. City Attorney		
Moved by:		_
Seconded by:		-
VOTE:		
Mayor Babb	(Yes)	(No)
		(No)
Commissioner McDonald	(Yes)	(No)
Commissioner McPherson	(Yes)	(No)
Commissioner Scott	(Yes)	(No)

# EXHIBIT "A"

## **Explanation of Insurance**

(attached)

# City of Pahokee

September 9, 2025





# Recommendations



RECOMMENDATION

Effective Date: October	1, 2023		CURRENT	2024-2025	RENEWAL 2025-2026				
Schedule of Benefits			Florida Blue - BlueCare 16253	Florida Blue - BlueCare 14256	Florida Blue - BlueCare 16253	Florida Blue - BlueCare 14256			
			In Network Only	In Network Only	In Network Only	In Network Only			
Deductible (Calendar Year - CYD)									
Single			\$4,250	\$1,000	\$4,250	\$1,000			
Family			\$8,500	\$3,000	\$8,500	\$3,000			
Coinsurance			0%	20%	0%	20%			
Maximum Out of Pocket (MOOP)									
Single			\$9,300	\$5,500	\$9,200	\$5,500			
Family			\$18,600	\$11,000	\$18,400	\$11,000			
Non-Hospital Services									
Physician Office Visit			\$25	\$20	\$35	\$20			
Specialist Visit			\$55	\$45	\$65	\$45			
Preventive Services (Wellness)			No Charge	No Charge	No Charge	No Charge			
Clinical Laboratory Services			\$55	\$25	\$55	\$25			
Advanced Imaging (MRI, PET, CT	scans)		\$350	\$250	\$550	\$350			
Outpatient Surgery in Surgical Ce	enter		\$400	\$200	\$400	\$200			
Physician Services at Surgical Cer	nter		\$150	\$100	\$150	\$150			
Urgent Care Center			\$60	\$50	\$60	\$50			
Hospital Services					·				
Inpatient Hospital			CYD + \$1,000/adm	CYD + \$500/adm	CYD + \$1,000/adm	CYD + \$500/adm			
Outpatient Hospital			\$500	\$350	\$650	\$450			
Physician Services at Hospital			\$150	\$100	\$150	\$150			
Emergency Room Visit			CYD + \$300	\$500	CYD + \$300	\$600			
Mental Health / Substance Abuse	Services			1000		,,,,,			
Inpatient Facility			No Charge	No Charge	No Charge	No Charge			
Outpatient Services			No Charge	No Charge	No Charge	No Charge			
Prescription Drug Benefits			110 01101,60	110 01141/60		. to enarge			
Tier 1			\$0 / \$4 / \$15	\$0 /\$4 / \$15	\$0/\$4/\$15	\$0 /\$4 / \$15			
Tier 2			\$30 / \$75	\$30 / \$60	\$30 / \$75	\$30 / \$60			
Tier 3			\$150	\$100	\$150	\$100			
Tier 4			N/A	N/A	N/A	N/A			
Tier 5 - Specialty			\$300	\$200	\$300	\$200			
Mail Order (90 day supply)			2x Retail	2x Retail	2x Retail	2x Retail			
Rates	1	2 <sup>1</sup>	ZX Netali	ZX Netali	ZX Netali	ZX Netali			
Employee Only		22	\$769.07	\$886.83	\$839.30	\$967.42			
Employee Only  Employee + Spouse			\$1,538.13	\$886.83 \$1,773.67	\$839.30	-			
	0	0				\$1,934.84			
Employee + Child(ren)	0	0	\$1,422.77	\$1,640.64	\$1,552.70	\$1,789.73			
Employee + Family  Monthly Premium	0 <b>2</b>	22	\$2,191.84 <b>\$1,538</b>	\$2,527.48 <b>\$19,510</b>	\$2,392.00 <b>\$1,679</b>	\$2,757.15 <b>\$21,283</b>			
Annual Premium	24		\$18,458	\$234,123	\$20,143 \$255,399				
TOTAL Premium Annual \$ Increase/(Decrease)			\$252 N	,581 ⁄A		5,542 ,961 <u> </u>			
Annual % Increase/(Decrease)				/A	9.1%				

Annual % Increase/(Decrease)

<sup>1</sup>Lives from July Invoice

Effective Date: October 1, 2025



#### **RECOMMENDATION**

#### Current 2024-2025

#### **Negotiated Renewal 2025-2026**

		Current	2024-2025	Negotiated Renewal 2025-2026				
SCHEDULE OF BENEFITS		Hui	mana	Hun	nana			
		In Network	Out of Network	In Network	Out of Network			
Annual Benefit Maximum		Unlimited	Unlimited	Unlimited	Unlimited			
Do Class 1 services apply toward Annual Max?		,	⁄es	Y	es			
Naiting Period(s)		N	one	No	ne			
Deductible		Calend	dar Year	Calend	ar Year			
Single/Family		\$50	/\$150	\$50/	\$150			
Is deductible waived for Class 1 services?		•	⁄es	Y	es			
Class 1 Services: Preventive and Diagnostic								
Routine Oral Exam		100%	100%	100%	100%			
Routine Cleaning		100% (2x/year)	100%	100% (2x/year)	100%			
Complete X-rays		100%	100%	100%	100%			
Bitewing X-rays		100%	100%	100%	100%			
Class 2 Services: Basic Restorative								
Fillings		80%	80%	80%	80%			
Simple Extractions (Oral Surgery)		80%	80%	80%	80%			
Class 3 Services: Major Restorative								
Periodontics		50%	50%	50%	50%			
Endodontics		50%	50%	50%	50%			
Bridges		50%	50%	50%	50%			
Crowns		50%	50%	50%	50%			
Dentures		50%	50%	50%	50%			
Implants		N/A	N/A	N/A	N/A			
Class 4 Services: Orthodontia								
Orthodontia Lifetime Maximum (Adult & Child)		50% up	to \$2,000	50% up t	o \$2,000			
Dental Plan Reimbursement Level								
Benefits Reimbursement Level		Fee Schedule	Fee Schedule	Fee Schedule	Fee Schedule			
Required Participation		Cu	rrent	Curi	rent			
Rate Guarantee		Expires	9/30/2025	Expires 9,	/30/2026			
Rates	Lives 1							
Employee	10		4.84	\$39				
Employee + Spouse	1		9.67	\$78				
mployee + Child(ren)	1	•	01.03	\$11:				
imployee + Family	2		39.12	\$154				
Monthly Premium	14		797		90			
Annual Premium			,568		,676			
Annual \$ Increase/Decrease			I/A		107			
Annual % Increase/Decrease			I/A	*Ovision   De	<b>6%</b> 9 <sup>-</sup>			

<sup>1</sup> Lives from July Invoice

\*Original Renewal: 13.9%

<sup>1</sup> Lives from July Invoice

**RFP Evaluation - Dental HMO** 

**Effective Date: October 1, 2025** 



#### **RECOMMENDATION**

Effective Date: October 1, 2025		Current 2024-2025	Renewal 2025-2026	
SCHEDULE OF BENEFITS		Humana Dental Prepaid HS210	Humana Dental Prepaid HS210	
Plan Basics	Code	In Network Only	In Network Only	
Office Visit	D9430	\$10	\$10	
Periodic Exam	D0120	\$0	\$0	
Full Mouth X-rays (Bitewings)	D0210	\$0	\$0	
Prophylaxis (Cleaning)	D1110	\$0	\$0	
Restorative Services (Fillings)				
Amalgam - 1 surface	D2140	\$20	\$20	
Resin - 1 surface - anterior	D2330	\$35	\$35	
Anesthesia/Nitrous Oxide	D9230	\$30	\$30	
Crowns				
Porcelain fused to High Noble Metal	D2750	\$350	\$350	
Full Cast High Noble Metal	D2790	\$350	\$350	
Endodontics (Root Canal Services)				
Anterior	D3310	\$135	\$135	
Bicuspid	D3320	\$240	\$240	
Molar	D3330	\$310	\$310	
Periodontics				
Gingivectomy (per quad)	D4210	\$135	\$135	
Scaling and Root Planning (per quad)	D4341	\$70	\$70	
Extraction Services (Oral Surgery)				
Single Tooth	D7111	\$0	\$0	
Partial Bony Impaction	D7230	\$85	\$85	
Complete Bony Impaction	D7240	\$105	\$105	
Orthodontia				
Comprehensive Treatment - Child (<19)	D8080	\$2,195	\$2,195	
Comprehensive Treatment - Adult	D8090	\$2,195	\$2,195	
Required Participation		Current	Current	
Rate Guarantee		Expires 9/30/2025	Expires 9/30/2026	
Rates	Lives 1			
Employee	5	\$12.95	\$12.95	
Employee + Spouse	1	\$25.91	\$25.91	
Employee + Child(ren)	1	\$29.14	\$29.14	
Employee + Family	1	\$46.89	\$46.89	
Monthly Premium	8	\$167	\$167	
Annual Premium		\$2,000	\$2,000	
\$ Increase / (Decrease)		N/A	\$0	
% Increase / (Decrease)		N/A	0.0%	92
1			0.070	1 92

## **City of Pahokee**

### **RFP Evaluation - Vision**

Effective Date: October 1, 2025



#### **Current 2024-2025**

#### **RECOMMENDATION**

Renewal 2025-2026

	Current 2	.024-2025	Renewal 2025-2026			
SCHEDULE OF BENEFITS	Humana -	Vision 200	Humana - Vision 200			
Examination	In-Network	Out-of-Network	In-Network	Out-of-Network		
Eye Exam Copay	\$0	Up to \$30	\$0	Up to \$30		
Materials Copay	\$0	Varies	\$0	Varies		
Retinal Imaging	Up to \$39	Not Covered	Up to \$39	Not Covered		
Frequency						
Examination	Every 12	2 months	Every 12	months		
Lenses or Contact Lenses	Every 12	2 months	Every 12	months		
Frames	Every 24	l months	Every 24	months		
Lenses						
Single	\$0	Up to \$25	\$0	Up to \$25		
Bifocal	\$0	Up to \$40	\$0	Up to \$40		
Trifocal	\$0	Up to \$60	\$0	Up to \$60		
Lenticular	\$0	Up to \$100	\$0	Up to \$100		
Standard Progressive	\$0	Up to \$40	\$0	Up to \$40		
Frames						
Retail Allowance	Up to \$200 + 20% off retail	Up to \$100	Up to \$200 + 20% off retail	Up to \$100		
Contacts Lenses						
Elective	Up to \$200 + 15% off retail	Up to \$160	Up to \$200 + 15% off retail	Up to \$160		
Non-Elective (Medically Necessary)	\$0	Up to \$210	\$0	Up to \$210		
Fitting and Evaluation (Standard)	\$0	Up to \$30	\$0	Up to \$30		
Rate Guarantee	Expires 9,	/30/2026	Expires 9/30/2026			
Monthly Rates Lives	1					
Employee 8	\$9.	83	\$9.	83		
Employee + Spouse 3	\$19	.66	\$19	.66		
Employee + Child(ren) 3	\$18	.68	\$18.68			
Employee + Family 3	\$29	.36	\$29	.36		
Monthly Premium 17	\$2	82	\$2	82		
Annual Premium	\$3,	381	\$3,381			
\$ Increase /(Decrease)	N,	/A	\$0			
% Increase /(Decrease)	N,	/A	0.0	0%		

<sup>&</sup>lt;sup>1</sup> Lives from July Invoice

# City of Pahokee RFP Evaluation - Basic Life and AD&D



**Effective Date: October 1, 2025** 

#### **RECOMMENDATION**

Current 2024-2025 Negotiated Renewal 2025-2026

	Current 2024-2025	Negotiated Renewal 2025-2026
	Humana	Humana
	All active employees working 30 hours/week	All active employees working 30 hours/week
	\$25,000	\$25,000
	Equal to Life Benefit	Equal to Life Benefit
	No/Yes	No/Yes
	Included	Included
	35% at age 65 55% at age 70 70% at age 75 80% at age 80 85% at age 85	35% at age 65 55% at age 70 70% at age 75 80% at age 80 85% at age 85
	50% of the Basic Life Benefit	50% of the Basic Life Benefit
	Expires 9/30/2025	Expires 9/30/2026
Lives*		
27	\$666,300	\$666,300
	\$0.310	\$0.310
	\$0.030	\$0.030
	\$0.340	\$0.340
	\$227	\$227
	\$2,719	\$2,719
	N/A	\$0
	N/A	0.0%
		### Humana  All active employees working 30 hours/week  \$25,000  Equal to Life Benefit   No/Yes  Included  35% at age 65 55% at age 70 70% at age 75 80% at age 80 85% at age 85 50% of the Basic Life Benefit  **Expires 9/30/2025  Lives**  27 \$666,300 \$0.310 \$0.030 \$0.340  \$227 \$2,719 N/A

<sup>\*</sup>Lives and volume from July invoice

# RFP Evaluation - Voluntary Life and AD&D

**Effective Date: October 1, 2025** 



#### Current 2024-2025

# **RECOMMENDATION**Renewal 2025-2026

	Current	2024-2025	Renewal 2025-2026		
Schedule of Benefits	Hun	nana	Humana		
Eligibility		mployees working 30 /week		mployees working 30 /week	
Employee		Increments of \$1,000 to the lesser of \$1,000,000 or 7x salary		000 to the lesser of or 7x salary	
Guarantee Issue	\$75	,000	\$75	,000	
Spouse	Increments of \$1,0	Increments of \$1,000 up to \$500,000		000 up to \$500,000	
Guarantee Issue	\$35	,000	\$35	,000	
Child	•	15 days - 6 months: \$500, 6 months and older: \$10,000		nonths: \$500, older: \$10,000	
Guarantee Issue	\$10	\$10,000		,000	
AD&D Benefit	100% of L	100% of Life Benefit		ife Benefit	
Age Reduction (Reduces By)	Age 7 Age 7 Age 8	Age 65: 35% Age 70: 55% Age 75: 70% Age 80: 80% Age 85: 85%		Age 65: 35% Age 70: 55% Age 75: 70% Age 80: 80% Age 85: 85%	
Portability/Conversion Option		/Yes	Yes/Yes		
Annual Enrollment Option		At OE, employees may add or increase coverage by up to \$25,000.		may add or increase up to \$25,000.	
Minimum Participation	Curi	rent	Cur	rent	
Rate Guarantee	Expires 9	/30/2025	Expires 9	/30/2026	
Rates per \$1,000	Employee	Spouse (Based on Spouse age)	Employee	Spouse (Based on Spouse age)	
<25 25 - 29 30 - 34 35 - 39 40 - 44 45 - 49 50 - 54 55 - 59 60 - 64 65 - 69 70 - 74 75 - 79 80+	\$0.060 \$0.060 \$0.070 \$0.090 \$0.140 \$0.220 \$0.350 \$0.550 \$0.780 \$1.280 \$2.490 \$4.810 \$8.980	\$0.060 \$0.060 \$0.070 \$0.090 \$0.130 \$0.210 \$0.330 \$0.520 \$0.740 \$1.210 \$2.370 \$4.580 \$8.530	\$0.060 \$0.060 \$0.070 \$0.090 \$0.140 \$0.220 \$0.350 \$0.550 \$0.780 \$1.280 \$2.490 \$4.810 \$8.980	\$0.060 \$0.060 \$0.070 \$0.090 \$0.130 \$0.210 \$0.330 \$0.520 \$0.740 \$1.210 \$2.370 \$4.580 \$8.530	
Child(ren) - per \$10,000		000	· ·	000	
AD&D - Employee/Spouse	\$0.	.030	\$0.	.030	

#### **Current 2024-2025**

#### Renewal 2025-2026

			Current 2	024-2025			Nenewa	31 2023-2020	,	
	Lives*	Employee	EE/Pay (24)	Employer	Total	Employee	EE/Pay (24)	Employer	Total	ER%
Medical HMO Plan 1			Florida Blue B	lueCare 16253			Florida Blue Bl	ueCare 16253		
Employee Only	2	\$76.91	\$38.45	\$692.16	\$769.07	\$83.93	\$41.97	\$755.37	\$839.30	90%
Employee + Spouse	0	\$845.97	\$422.98	\$692.16	\$1,538.13	\$923.22	\$461.61	\$755.37	\$1,678.59	45%
Employee + Child(ren)	0	\$730.61	\$365.30	\$692.16	\$1,422.77	\$797.33	\$398.67	\$755.37	\$1,552.70	49%
Employee + Family	0	\$1,499.68	\$749.84	\$692.16	\$2,191.84	\$1,636.63	\$818.32	\$755.37	\$2,392.00	32%
Medical HMO Plan 2			Florida Blue B	lueCare 14256			Florida Blue Bl	ueCare 14256		
Employee Only	22	\$88.68	\$44.34	\$798.15	\$886.83	\$96.74	\$48.37	\$870.68	\$967.42	90%
Employee + Spouse	0	\$975.52	\$487.76	\$798.15	\$1,773.67	\$1,064.16	\$532.08	\$870.68	\$1,934.84	45%
Employee + Child(ren)	0	\$842.49	\$421.25	\$798.15	\$1,640.64	\$919.05	\$459.53	\$870.68	\$1,789.73	49%
Employee + Family	0	\$1,729.33	\$864.67	\$798.15	\$2,527.48	\$1,886.47	\$943.24	\$870.68	\$2,757.15	32%
Annual Total	24	\$25,257		\$227,323	\$252,581	\$27,554		\$247,988	\$275,542	
\$ Increase/Decrease						\$2,296		\$20,665	\$22,961	
% Increase/Decrease						9.1%		9.1%	9.1%	
Dental HMO			Hum	nana			Hum	ana		
Employee Only	5	\$6.47	\$3.24	\$6.48	\$12.95	\$6.47	\$3.24	\$6.48	\$12.95	50%
Employee + Spouse	1	\$19.43	\$9.72	\$6.48	\$25.91	\$19.43	\$9.72	\$6.48	\$25.91	25%
Employee + Child(ren)	1	\$22.66	\$11.33	\$6.48	\$29.14	\$22.66	\$11.33	\$6.48	\$29.14	22%
Employee + Family	1	\$40.41	\$20.21	\$6.48	\$46.89	\$40.41	\$20.21	\$6.48	\$46.89	14%
Dental PPO			Hum	nana			Hum	ana		
Employee Only	10	\$28.36	\$14.18	\$6.48	\$34.84	\$32.62	\$16.31	\$6.48	\$39.10	17%
Employee + Spouse	1	\$63.19	\$31.60	\$6.48	\$69.67	\$71.72	\$35.86	\$6.48	\$78.20	8%
Employee + Child(ren)	1	\$94.55	\$47.28	\$6.48	\$101.03	\$105.43	\$52.72	\$6.48	\$111.91	6%
Employee + Family	2	\$132.64	\$66.32	\$6.48	\$139.12	\$147.78	\$73.89	\$6.48	\$154.26	4%
Annual Total	22	\$9,858		\$1,711	\$11,568	\$10,965		\$1,711	\$12,676	
\$ Increase/Decrease						\$1,107		\$0	\$1,107	
% Increase/Decrease						11.2%		0.0%	9.6%	
Vision			Hum	nana			Hum	ana		
Employee Only	8	\$9.83	\$4.92	\$0.00	\$9.83	\$9.83	\$4.92	\$0.00	\$9.83	0%
Employee + Spouse	3	\$19.66	\$9.83	\$0.00	\$19.66	\$19.66	\$9.83	\$0.00	\$19.66	0%
Employee + Child(ren)	3	\$18.68	\$9.34	\$0.00	\$18.68	\$18.68	\$9.34	\$0.00	\$18.68	0%
Employee + Family	3	\$29.36	\$14.68	\$0.00	\$29.36	\$29.36	\$14.68	\$0.00	\$29.36	0%
Annual Total	17	\$3,381		\$0	\$3,381	\$3,381		\$0	\$3,381	
\$ Increase/Decrease						\$0		\$0	\$0	
% Increase/Decrease						0.0%		0.0%	0.0%	
Basic Life and AD&D			Hum	nana			Hum			
Estimated Volume		N/A	N/A	\$666,300	\$666,300	N/A	N/A	\$666,300	\$666,300	100%
Basic Life Rate/\$1,000		\$0.000	\$0.000	\$0.310	\$0.310	\$0.000	\$0.000	\$0.310	\$0.310	100%
AD&D Rate/\$1,000		\$0.000	\$0.000	\$0.030	\$0.030	\$0.000	\$0.000	\$0.030	\$0.030	100%
Total Rate/\$1,000		\$0.000	\$0.000	\$0.340	\$0.340	\$0.000	\$0.000	\$0.340	\$0.340	100%
Annual Total	27	\$0		\$2,719	\$2,719	\$0		\$2,719	\$2,719	
\$ Increase/Decrease				•		\$0		\$0	\$0	
% Increase/Decrease						0.0%		0.0%	0.0%	
Voluntary Life and AD&I	D		Hum	nana			Hum			
Voluntary Life Rate				ded Rates			Age Band			0%
Annual Total		\$4,788	<b>5</b>	\$0	\$4,788	\$4,788	<u> </u>	\$0	\$4,788	
\$ Increase/Decrease		1 /2 00				\$0		\$0	\$0	
% Increase/Decrease						0.0%		0.0%	0.0%	
COMBINED ANNUAL TO	TAL	\$43,284	N/A	\$231,753	\$275,037	\$46,688	N/A	\$252,418	\$299,105	
\$ Increase/Decrease		, ,,=0	,	, , , , , , ,	, .,,	\$3,404	,	\$20,665	\$24,069	
% Increase/Decrease						7.9%		8.9%	8.8%	
, 200.000						,.		2.370	2.57	

# **Addendum**

#### **Renewal & RFP Evaluation - Medical**

Effective Date: October 1, 2025



			2024-2025	ALTERNATE #1		
Schedule of Benefits		Florida Blue - BlueCare 16253	Florida Blue - BlueCare 14256	Florida Blue - BlueCare 24301	Florida Blue - BlueCare 14353	
		In Network Only	In Network Only	In Network Only	In Network Only	
eductible (Calendar Year - CYD)						
Single		\$4,250	\$1,000	\$5,000	\$2,000	
Family		\$8,500	\$3,000	\$10,000	\$4,000	
Coinsurance		0%	20%	20%	20%	
Maximum Out of Pocket (MOOP)						
Single		\$9,300	\$5,500	\$9,100	\$5,000	
Family		\$18,600	\$11,000	\$18,200	\$10,000	
Non-Hospital Services						
Physician Office Visit		\$25	\$20	No Charge (Visits 1-3), then \$50	\$35	
Specialist Visit		\$55	\$45	\$85	\$60	
Preventive Services (Wellness)		No Charge	No Charge	No Charge	No Charge	
Clinical Laboratory Services		\$55	\$25	\$50	\$50	
Advanced Imaging (MRI, PET, CT scans)		\$350	\$250	20% after CYD	20% after CYD	
Outpatient Surgery in Surgical Center		\$400	\$200	20% after CYD	20%	
Physician Services at Surgical Center		\$150	\$100	20% after CYD	\$100	
Urgent Care Center		\$60	\$50	\$90	\$65	
Hospital Services		, , ,	755	100	***	
Inpatient Hospital		CYD + \$1,000/adm	CYD + \$500/adm	20% after CYD	20% after CYD	
Outpatient Hospital		\$500	\$350	20% after CYD	20% after CYD	
Physician Services at Hospital		\$150 \$150	\$100	20% after CYD	\$100	
Emergency Room Visit		CYD + \$300	\$500	\$750	20% after CYD	
Mental Health / Substance Abuse Services		C1D + \$300	φ3000	\$730	20% after CTD	
-		No Chausa	No Chausa	No Channa	No Chausa	
Inpatient Facility		No Charge	No Charge	No Charge	No Charge	
Outpatient Services		No Charge	No Charge	No Charge	No Charge	
Prescription Drug Benefits						
Tier 1		\$0 / \$4 / \$15	\$0 /\$4 / \$15	\$0 / \$4 / \$15	\$0 /\$4 / <b>\$10</b>	
Tier 2		\$30 / \$75	\$30 / \$60	\$20 / CYD + \$40	\$15 / \$30	
Tier 3		\$150	\$100	CYD + \$75	\$50	
Tier 4		N/A	N/A	N/A	N/A	
Tier 5 - Specialty		\$300	\$200	CYD + \$200	\$150	
Mail Order (90 day supply)		2x Retail	2x Retail	2x Retail	2x Retail	
Rates 1	2¹					
Employee Only 2	22	\$769.07	\$886.83	\$797.68	\$928.41	
Employee + Spouse 0	0	\$1,538.13	\$1,773.67	\$1,595.35	\$1,856.81	
Employee + Child(ren) 0	0	\$1,422.77	\$1,640.64	\$1,475.70	\$1,717.55	
Employee + Family 0	0	\$2,191.84	\$2,527.48	\$2,273.38	\$2,645.96	
Monthly Premium 2 Annual Premium	22 24	\$1,538 \$18,458	\$19,510 \$234,123	\$1,595 \$19,144	\$20,425 \$245,100	
TOTAL Premium		\$252	2,581	\$264	,245	
Annual \$ Increase/(Decrease) Annual % Increase/(Decrease)			/A /A	\$11, 4.6		

Renewal & RFP Evaluation - Medical

Effective Date: October 1. 2025



			2024-2025	ALTERNATE #2*			
Schedule of Benefits		Florida Blue - BlueCare 16253	Florida Blue - BlueCare 14256	UnitedHealthcare - NHP HMO DYZY NH2S	UnitedHealthcare - NHP HMO DY1X NH2S		
		In Network Only	In Network Only	In Network Only	In Network Only		
Peductible (Calendar Year - CYD)							
Single		\$4,250	\$1,000	\$5,000	\$1,750		
Family		\$8,500	\$3,000	\$10,000	\$3,500		
Coinsurance		0%	20%	50%	30%		
Maximum Out of Pocket (MOOP)							
Single		\$9,300	\$5,500	\$9,100	\$5,250		
Family		\$18,600	\$11,000	\$18,200	\$10,500		
Ion-Hospital Services							
Physician Office Visit		\$25	\$20	\$50	DDP: \$35 / NDDP: \$45		
Specialist Visit		\$55	\$45	\$75	DDP: <b>\$70</b> / NDDP: <b>\$80</b>		
Preventive Services (Wellness)		No Charge	No Charge	No Charge	No Charge		
Clinical Laboratory Services		\$55	\$25	\$50	\$35		
Advanced Imaging (MRI, PET, CT sca	ans)	\$350	\$250	DDP: \$500 / Non-DDP: 50% after CYD	DDP: <b>\$500</b> / Non-DDP: <b>50% after CYD</b>		
Outpatient Surgery in Surgical Cent	er	\$400	\$200	50% after CYD	30% after CYD		
Physician Services at Surgical Cente		\$150	\$100	50% after CYD	30% after CYD		
Urgent Care Center		\$60	\$50	\$75	\$75		
lospital Services							
Inpatient Hospital		CYD + \$1,000/adm	CYD + \$500/adm	50% after CYD	30% after CYD		
Outpatient Hospital		\$500	\$350	50% after CYD	30% after CYD		
Physician Services at Hospital		\$150	\$100	50% after CYD	30% after CYD		
Emergency Room Visit		CYD + \$300	\$500	50% after CYD	\$750		
Nental Health / Substance Abuse Se	ervices	<b>,</b>	7555		, , , , , , , , , , , , , , , , , , ,		
Inpatient Facility		No Charge	No Charge	50% after CYD	30% after CYD		
Outpatient Services		No Charge	No Charge	OV: \$75 / Other: 50%	OV: \$70 / Other: CYD		
Prescription Drug Benefits		No charge	No charge	0v. 473 / Other. 3070	0V. \$70 / Other. CTD		
		¢0 /¢4 /¢15	\$0 /\$4 / \$15	\$10	\$10		
Tier 1		\$0 / \$4 / \$15			·		
Tier 2		\$30 / \$75	\$30 / \$60	\$40	\$40		
Tier 3		\$150	\$100	\$140	\$140		
Tier 4		N/A	N/A	\$300	\$300		
Tier 5 - Specialty		\$300	\$200	\$10/\$40/\$140/\$500	\$10/\$40/\$140/\$500		
Mail Order (90 day supply)		2x Retail	2x Retail	2.5x Retail	2.5x Retail		
Rates	1 2 <sup>1</sup>						
Employee Only	2 22	\$769.07	\$886.83	\$842.43	\$961.50		
Employee + Spouse	0 0	\$1,538.13	\$1,773.67	\$1,684.86	\$1,923.00		
Employee + Child(ren)	0 0	\$1,422.77	\$1,640.64	\$1,558.50	\$1,778.78		
Employee + Family	0 0	\$2,191.84	\$2,527.48	\$2,400.93	\$2,740.28		
Monthly Premium Annual Premium	2 22 24	\$1,538 \$18,458	\$19,510 \$234,123	\$1,685 \$20,218	\$21,153 \$253,836		
ΓΟΤΑL Premium		\$252	2,581	\$274	1,054		
Annual \$ Increase/(Decrease) Annual % Increase/(Decrease)		N, N,	/A		,474 5%		

**Effective Date: October 1, 2025** 



#### Current 2024-2025

		Current	2024-2025	Alternate #1		
SCHEDULE OF BENEFITS		Hur	nana	Guardian		
		In Network	Out of Network	In Network	Out of Network	
Annual Benefit Maximum		Unlimited	Unlimited	\$5,000 + Rollover	\$5,000 + Rollove	
Do Class 1 services apply toward Annual Max?		Y	'es	Ne		
Waiting Period(s)		N	one	Noi	ne	
Deductible		Calend	lar Year	Calenda	r Year	
Single/Family		\$50	/\$150	\$50/\$	150	
Is deductible waived for Class 1 services?		Y	'es	Ye	S	
Class 1 Services: Preventive and Diagnostic						
Routine Oral Exam		100%	100%	100%	100%	
Routine Cleaning		100% (2x/year)	100%	100% (2x/year)	100%	
Complete X-rays		100%	100%	100%	100%	
					100%	
Bitewing X-rays		100%	100%	100%	100%	
Class 2 Services: Basic Restorative						
Fillings		80%	80%	80%	80%	
Simple Extractions (Oral Surgery)		80%	80%	80%	80%	
Class 3 Services: Major Restorative						
Periodontics		50%	50%	50%	50%	
Endodontics		50%	50%	50%	50%	
Bridges		50%	50%	50%	50%	
Crowns		50%	50%	50%	50%	
Dentures		50%	50%	50%	50%	
Implants		N/A	N/A	N/A	N/A	
Class 4 Services: Orthodontia						
Orthodontia Lifetime Maximum (Adult & Child)		50% up	to \$2,000	50% up to	\$1,500	
Dental Plan Reimbursement Level						
Benefits Reimbursement Level		Fee Schedule	Fee Schedule	Fee Schedule	Fee Schedule	
Required Participation		Cur	rent	81% of eligible	e employees	
Rate Guarantee		Expires 9	0/30/2025	Expires 9/	30/2026	
Rates	Lives 1					
Employee	10		1.84	\$30.		
Employee + Spouse	1	\$69.67		\$61.		
Employee + Child(ren)	1	\$101.03		\$82.		
Employee + Family	2	\$139.12		\$121		
Monthly Premium	14	\$797		\$69		
Annual Premium			,568	\$8,2		
Annual \$ Increase/Decrease			I/A	-\$1,2		
Annual % Increase/Decrease  1 Lives from July Invoice		N	I/A	-13.	10	

Effective Date: October 1, 2025



#### Current 2024-2025

In Net	Hum	ana	Met	Life	
In Ne			MetLife		
	twork	Out of Network	In Network	Out of Netw	
Unlir	mited	Unlimited	\$2,500	\$2,500	
	Yes		Yes		
	Noi	ne	No	ne	
	Calendo	ır Year	Calendo	ar Year	
	\$50/\$	\$150	\$50/	\$150	
10	10%	100%	100%	100%	
				100%	
10	0%	100%	100%	100%	
10	0%	100%	100%	100%	
80	)%	80%	80%	80%	
80	0%	80%	80%	80%	
50	0%	50%	50%	50%	
50	0%	50%	50%	50%	
5(	0%	50%	50%	50%	
5(	0%	50%	50%	50%	
5(	0%	50%	50%	50%	
		N/A	50%	50%	
	,	,			
	50% up to	o \$2.000	50% up to \$2.0	00 (Child Only)	
	2271 Sp 11	- + -,	3371 34 4=75	(c	
Fee Sc	hedule	Fee Schedule	Fee Schedule	90th Percen	
	Expires 9/		Expires 9/30/2026		
ives 1					
10	\$34.	.84	\$44	.41	
1	\$69.67		\$87		
1	\$101.03				
2	\$139.12				
14					
			\$1,818		
	100% (3 10 10 10 10 80 80 80 50 50 50 N Fee Sc	Non   Calenda   \$50/\$   \$50/\$   Ye	Calendar Year         \$50/\$150         Yes         100%       100%         100% (2x/year)       100%         100%       100%         100%       100%         80%       80%         80%       80%         50%       50%	None	

Effective Date: October 1, 2025



#### Current 2024-2025

		Current	2024-2025	Alternate #3		
SCHEDULE OF BENEFITS		Hu	mana	Principal		
		In Network	Out of Network	In Network	Out of Network	
Annual Benefit Maximum		Unlimited	Unlimited	\$2,000 + Rollover	\$2,000 + Rollove	
Oo Class 1 services apply toward Annual Max?		•	Yes	Yes		
Naiting Period(s)		N	one	No	ne	
Deductible		Calen	dar Year	Calendo	ar Year	
Single/Family		\$50	/\$150	\$50/	\$150	
Is deductible waived for Class 1 services?		,	Yes	Ye	25	
Class 1 Services: Preventive and Diagnostic						
Routine Oral Exam		100%	100%	100%	100%	
Routine Cleaning		100% (2x/year)	100%	100% ( <b>4x/</b> year)	100%	
Complete X-rays		100%	100%	100%	100%	
Bitewing X-rays		100%	100%	100%	100%	
Class 2 Services: Basic Restorative						
Fillings		80%	80%	80%	80%	
Simple Extractions (Oral Surgery)		80%	80%	80%	80%	
Class 3 Services: Major Restorative		5676	3070	3070	3070	
Periodontics		50%	50%	50%	50%	
			50%			
Endodontics		50%		50%	50%	
Bridges		50%	50%	50%	50%	
Crowns		50%	50%	50%	50%	
Dentures		50%	50%	50%	50%	
Implants		N/A	N/A	N/A	N/A	
Class 4 Services: Orthodontia						
Orthodontia Lifetime Maximum (Adult & Child)		50% up	to \$2,000	50% up to	o \$2,000	
Dental Plan Reimbursement Level						
Benefits Reimbursement Level		Fee Schedule	Fee Schedule	Fee Schedule	Fee Schedule	
Required Participation		Cu	rrent	50% of eligibl	e employees	
Rate Guarantee		Expires	9/30/2025	Expires 9/	/30/2026	
Rates	Lives 1				25	
Employee	10		4.84	\$38		
Employee + Spouse	1	\$69.67		\$74		
Employee + Child(ren)	1	\$101.03		\$90.52 \$132.93		
Employee + Family  Monthly Premium	2 14	\$139.12 <b>\$797</b>		\$132		
Annual Premium	17		),568	\$9,7		
Annual \$ Increase/Decrease			N/A	\$1		
Annual % Increase/Decrease			N/A	2.0		

Effective Date: October 1, 2025



#### Current 2024-2025

		Current	2024-2025	Alternate #4		
SCHEDULE OF BENEFITS		Hui	mana	UnitedHealthcare		
		In Network	Out of Network	In Network	Out of Network	
Annual Benefit Maximum		Unlimited	Unlimited	Unlimited	Unlimited	
Do Class 1 services apply toward Annual Max?		,	⁄es	Ye	S	
Waiting Period(s)		N	one	Noi	ne	
Deductible		Calend	dar Year	Calenda	r Year	
Single/Family		\$50	/\$150	\$50/\$	5150	
Is deductible waived for Class 1 services?		,	⁄es	Ye	S	
Class 1 Services: Preventive and Diagnostic						
Routine Oral Exam		100%	100%	100%	100%	
Routine Cleaning		100% (2x/year)	100%	100% (4x/year)	100%	
Complete X-rays		100%	100%	100%	100%	
Bitewing X-rays		100%	100%	100%	100%	
Class 2 Services: Basic Restorative						
Fillings		80%	80%	80%	80%	
Simple Extractions (Oral Surgery)		80%	80%	80%	80%	
Class 3 Services: Major Restorative		30%	3070	0070	3070	
Periodontics		50%	50%	50%	50%	
Endodontics		50%	50%	80%	80%	
Bridges		50%	50%	50%	50%	
Crowns		50%	50%	50%	50%	
Dentures		50%	50%	50%	50%	
Implants		N/A	N/A	50%	50%	
Class 4 Services: Orthodontia		5004	. 42.000	500/	42.000	
Orthodontia Lifetime Maximum (Adult & Child)		50% up	to \$2,000	50% up to	5 \$2,000	
Dental Plan Reimbursement Level		Foo Cabad Is	For Cabad L	Foe School L	Fee Calculat	
Benefits Reimbursement Level		Fee Schedule	Fee Schedule	Fee Schedule	Fee Schedule	
Required Participation  Rate Guarantee		Current Expires 9/30/2025		50% of eligible employees  Expires 9/30/2026		
Rates	Lives 1	Expires		Expires 37	,	
Employee	10	\$3	4.84	\$41.	06	
Employee + Spouse	1	\$69.67		\$82.12		
Employee + Child(ren)	1	\$101.03		\$96.62		
Employee + Family	2	\$139.12		\$145	.09	
Monthly Premium	14	\$797		\$88		
Annual Premium		\$9,568		\$10,554		
Annual \$ Increase/Decrease			I/A	\$986		
Annual % Increase/Decrease			I/A	10.3	10	

**Effective Date: October 1, 2025** 



#### Current 2024-2025

Curren	t 2024-2025	Alternate #5			
Н	umana	Uni	Unum		
In Network	Out of Network	In Network	Out of Network		
Unlimited	Unlimited	\$5,000 + Rollover	\$5,000 + Rollove		
	Yes	Ye	25		
	None		! Months		
Cale	Calendar Year		ar Year		
ς.	50/\$150	\$50/9	\$150		
	res	Ye	:5		
100%	100%	100%	100%		
100% (2x/year)	100%	100% (2x/year)	100%		
100%	100%	80%	80%		
100%	100%	100%	100%		
80%	80%	80%	80%		
80%	80%	80%	80%		
50%	50%	50%	50%		
	50%	50%	50%		
			50%		
			50%		
			50%		
N/A	N/A	50%	50%		
50% เ	up to \$2,000	50% up t	o \$2,000		
Fee Schedule	Fee Schedule	Fee Schedule	Fee Schedule		
	Current	51% of eligibl	e employees		
Expire	s 9/30/2025	Expires 9/	/30/2026		
Lives <sup>1</sup>					
	\$34.84				
	\$69.67				
	\$101.03				
	59,568 N/A	\$10,			
	IV/A	\$9	13		
	In Network   Unlimited	Unlimited	Humana		

**Effective Date: October 1, 2025** 



Current 2024-2025

		Current 2024-2023	Aiternate #1		
SCHEDULE OF BENEFITS		Humana Dental Prepaid HS210	Guardian Managed Dental Care N200		
Plan Basics	Code	In Network Only			
Office Visit	D9430	\$10	\$5		
Periodic Exam	D0120	\$0	\$0		
Full Mouth X-rays (Bitewings)	D0210	\$0	\$0		
Prophylaxis (Cleaning)	D1110	\$0	\$0		
Restorative Services (Fillings)					
Amalgam - 1 surface	D2140	\$20	\$20		
Resin - 1 surface - anterior	D2330	\$35	\$26		
Anesthesia/Nitrous Oxide	D9230	\$30	Covered with surgical procedure		
Crowns					
Porcelain fused to High Noble Metal	D2750	\$350	\$430		
Full Cast High Noble Metal	D2790	\$350	\$430		
Endodontics (Root Canal Services)					
Anterior	D3310	\$135	\$130		
Bicuspid	D3320	\$240	\$150		
Molar	D3330	\$310	\$195		
Periodontics					
Gingivectomy (per quad)	D4210	\$135	\$150		
Scaling and Root Planning (per quad)	D4341	\$70	\$55		
Extraction Services (Oral Surgery)					
Single Tooth	D7111	\$0	\$20		
Partial Bony Impaction	D7230	\$85	\$75		
Complete Bony Impaction	D7240	\$105	\$125		
Orthodontia					
Comprehensive Treatment - Child (<19)	D8080	\$2,195	\$1,895		
Comprehensive Treatment - Adult	D8090	\$2,195	\$2,195		
Required Participation		Current	Current		
Rate Guarantee		Expires 9/30/2025	Expires 9/30/2026		
Rates	Lives 1				
Employee	5	\$12.95	\$14.76		
Employee + Spouse	1	\$25.91	\$29.52		
	1	\$29.14	\$32.24		
Employee + Child(ren)	1	\$46.89	\$49.78		
Employee + Family					
Monthly Premium	8	\$167	\$185		
Annual Premium		\$2,000	\$2,224		
\$ Increase / (Decrease)		N/A	\$224		
% Increase / (Decrease)  Lives from July Invoice		N/A	<b>11.2%</b> 105		

**Effective Date: October 1, 2025** 



#### Current 2024-2025

		Current 2024-2025	Alternate #2		
SCHEDULE OF BENEFITS		Humana Dental Prepaid HS210	MetLife Managed Dental Plan		
Plan Basics	Code	In Network Only	In Network Only		
Office Visit	D9430	\$10	\$0		
Periodic Exam	D0120	\$0	\$0		
Full Mouth X-rays (Bitewings)	D0210	\$0	\$0		
Prophylaxis (Cleaning)	D1110	\$0	\$5		
Restorative Services (Fillings)					
Amalgam - 1 surface	D2140	\$20	\$12		
Resin - 1 surface - anterior	D2330	\$35	\$12		
Anesthesia/Nitrous Oxide	D9230	\$30	\$15		
Crowns					
Porcelain fused to High Noble Metal	D2750	\$350	\$335		
Full Cast High Noble Metal	D2790	\$350	\$335		
Endodontics (Root Canal Services)					
Anterior	D3310	\$135	\$130		
Bicuspid	D3320	\$240	\$215		
Molar	D3330	\$310	\$305		
Periodontics					
Gingivectomy (per quad)	D4210	\$135	\$150		
Scaling and Root Planning (per quad)	D4341	\$70	\$60		
Extraction Services (Oral Surgery)					
Single Tooth	D7111	\$0	\$5		
Partial Bony Impaction	D7230	\$85	\$65		
Complete Bony Impaction	D7240	\$105	\$1 <b>3</b> 5		
Orthodontia					
Comprehensive Treatment - Child (<19)	D8080	\$2,195	\$2,410		
Comprehensive Treatment - Adult	D8090	\$2,195	\$2,410		
Required Participation		Current	10 enrolled		
Rate Guarantee		Expires 9/30/2025	Expires 9/30/2026		
Rates	Lives 1	Expires 5/30/2025	EXPITES 3/30/2020		
	Lives 5	\$12.95	\$11.72		
Employee	1	\$25.91	\$20.52		
Employee + Spouse		\$29.14	\$24.62		
Employee + Child(ren)	1				
Employee + Family	1	\$46.89	\$34.58		
Monthly Premium	8	\$167	\$138		
Annual Premium		\$2,000	\$1,660		
\$ Increase / (Decrease)		N/A	-\$340		
% Increase / (Decrease)		N/A	<b>-17.0</b> % 106		

**Effective Date: October 1, 2025** 



Current 2024-2025

		Current 2024-2025	Alternate #3
SCHEDULE OF BENEFITS		Humana Dental Prepaid HS210	Principal Solstice S700B
Plan Basics	Code	In Network Only	In Network Only
Office Visit	D9430	\$10	\$0
Periodic Exam	D0120	\$0	\$0
Full Mouth X-rays (Bitewings)	D0210	\$0	\$0
Prophylaxis (Cleaning)	D1110	\$0	\$0
Restorative Services (Fillings)			
Amalgam - 1 surface	D2140	\$20	\$0
Resin - 1 surface - anterior	D2330	\$35	\$30
Anesthesia/Nitrous Oxide	D9230	\$30	\$20
Crowns			
Porcelain fused to High Noble Metal	D2750	\$350	\$245
Full Cast High Noble Metal	D2790	\$350	\$245
Endodontics (Root Canal Services)			
Anterior	D3310	\$135	\$110
Bicuspid	D3320	\$240	\$195
Molar	D3330	\$310	\$245
Periodontics			
Gingivectomy (per quad)	D4210	\$135	\$175
Scaling and Root Planning (per quad)	D4341	\$70	\$50
Extraction Services (Oral Surgery)			
Single Tooth	D7111	\$0	\$50
Partial Bony Impaction	D7230	\$85	\$65
Complete Bony Impaction	D7240	\$105	\$80
Orthodontia			
Comprehensive Treatment - Child (<19)	D8080	\$2,195	\$2,250
Comprehensive Treatment - Adult	D8090	\$2,195	\$2,350
Required Participation	20030	Current	2 enrolled in DHMO, 50% across both plans
Rate Guarantee		Expires 9/30/2025	Expires 9/30/2026
Rates	Lives 1	Expires 3/30/2023	Expires 3/30/2020
	5	\$12.95	\$12.09
Employee		\$25.91	\$21.17
Employee + Spouse	1		
Employee + Child(ren)	1	\$29.14	\$26.21
Employee + Family	1	\$46.89	\$33.26
Monthly Premium	8	\$167	\$141
Annual Premium		\$2,000	\$1,693
\$ Increase / (Decrease)		N/A	-\$307
% Increase / (Decrease)		N/A	<b>-15.4</b> % 107

**Effective Date: October 1, 2025** 



Current 2024-2025

SCHEDULE OF BENEFITS		Humana Dental Prepaid HS210	UnitedHealthcare D1056
Plan Basics	Code	In Network Only	In Network Only
Office Visit	D9430	\$10	\$0
Periodic Exam	D0120	\$0	\$0
Full Mouth X-rays (Bitewings)	D0210	\$0	\$0
Prophylaxis (Cleaning)	D1110	\$0	\$0
Restorative Services (Fillings)			
Amalgam - 1 surface	D2140	\$20	\$0
Resin - 1 surface - anterior	D2330	\$35	\$20
Anesthesia/Nitrous Oxide	D9230	\$30	\$20
Crowns			
Porcelain fused to High Noble Metal	D2750	\$350	\$195
Full Cast High Noble Metal	D2790	\$350	\$195
Endodontics (Root Canal Services)			
Anterior	D3310	\$135	\$100
Bicuspid	D3320	\$240	\$175
Molar	D3330	\$310	\$210
Periodontics			
Gingivectomy (per quad)	D4210	\$135	\$175
Scaling and Root Planning (per quad)	D4341	\$70	\$36
Extraction Services (Oral Surgery)			
Single Tooth	D7111	\$0	\$45
Partial Bony Impaction	D7230	\$85	\$55
Complete Bony Impaction	D7240	\$105	\$63
Orthodontia			
Comprehensive Treatment - Child (<19)	D8080	\$2,195	\$1,850
Comprehensive Treatment - Adult	D8090	\$2,195	\$1,950
Required Participation		Current	Current
Rate Guarantee		Expires 9/30/2025	Expires 9/30/2026
Rates	Lives 1		, , ,
Employee	5	\$12.95	\$14.10
Employee + Spouse	1	\$25.91	\$24.68
	1	\$29.14	\$30.55
Employee + Child(ren)	1	\$46.89	\$38.78
Employee + Family			
Monthly Premium	8	\$167	\$165
Annual Premium		\$2,000	\$1,974
\$ Increase / (Decrease)		N/A	-\$26
% Increase / (Decrease) <sup>1</sup> Lives from July Invoice		N/A	<b>-1.3%</b> 108

RFP Evaluation - Dental HMO

**Effective Date: October 1, 2025** 



Current 2024-2025

		Current 2024-2025	Alternate #5	
SCHEDULE OF BENEFITS		Humana Dental Prepaid HS210	UnitedHealthcare D1057	
Plan Basics	Code	In Network Only	In Network Only	
Office Visit	D9430	\$10	\$0	
Periodic Exam	D0120	\$0	\$0	
Full Mouth X-rays (Bitewings)	D0210	\$0	\$0	
Prophylaxis (Cleaning)	D1110	\$0	\$0	
Restorative Services (Fillings)				
Amalgam - 1 surface	D2140	\$20	\$0	
Resin - 1 surface - anterior	D2330	\$35	\$25	
Anesthesia/Nitrous Oxide	D9230	\$30	\$20	
Crowns				
Porcelain fused to High Noble Metal	D2750	\$350	\$240	
Full Cast High Noble Metal	D2790	\$350	\$240	
Endodontics (Root Canal Services)				
Anterior	D3310	\$135	\$100	
Bicuspid	D3320	\$240	\$185	
Molar	D3330	\$310	\$225	
Periodontics				
Gingivectomy (per quad)	D4210	\$135	\$175	
Scaling and Root Planning (per quad)	D4341	\$70	\$45	
Extraction Services (Oral Surgery)				
Single Tooth	D7111	\$0	\$45	
Partial Bony Impaction	D7230	\$85	\$60	
Complete Bony Impaction	D7240	\$105	\$75	
Orthodontia				
Comprehensive Treatment - Child (<19)	D8080	\$2,195	\$2,050	
Comprehensive Treatment - Adult	D8090	\$2,195	\$2,150	
Required Participation		Current	Current	
Rate Guarantee		Expires 9/30/2025	Expires 9/30/2026	
Rates	Lives 1			
Employee	5	\$12.95	\$13.11	
Employee + Spouse	1	\$25.91	\$22.94	
Employee + Shouse  Employee + Child(ren)	1	\$29.14	\$28.41	
	1	\$46.89	\$36.06	
Employee + Family  Monthly Promium				
Monthly Premium	8	\$167	\$153	
Annual Premium		\$2,000	\$1,836	
\$ Increase / (Decrease)		N/A	-\$165	
% Increase / (Decrease)  Lives from July Invoice		N/A	<b>-8.2%</b> 109	

### **RFP Evaluation - Vision**

**Effective Date: October 1, 2025** 



#### **Current 2024-2025**

Alternate #2\*

	Current 2024-2025		Alternate #2*		
SCHEDULE OF BENEFITS	Humana -	Vision 200	Guardian - VSP Enhanced Choice B		
Examination	In-Network	Out-of-Network	In-Network	Out-of-Network	
Eye Exam Copay	\$0	Up to \$30	\$0	Up to <b>\$39</b>	
Materials Copay	\$0	Varies	\$0	Varies	
Retinal Imaging	Up to \$39	Not Covered	Up to \$39	Not Covered	
Frequency					
Examination	Every 12	2 months	Every 12 months		
Lenses or Contact Lenses	Every 12	2 months	Every 12	2 months	
Frames	Every 24	1 months	Every 24	months	
Lenses					
Single	\$0	Up to \$25	\$0	Up to <b>\$23</b>	
Bifocal	\$0	Up to \$40	\$0	Up to <b>\$37</b>	
Trifocal	\$0	Up to \$60	\$0	Up to <b>\$49</b>	
Lenticular	\$0	Up to \$100	\$0	Up to <b>\$64</b>	
Standard Progressive	\$0	Up to \$40	\$55	Not Provided	
Frames					
Retail Allowance	Up to \$200 + 20% off retail	Up to \$100	Up to \$200 + 20% off retail	Up to <b>\$46</b>	
Contacts Lenses					
Elective	Up to \$200 + 15% off retail	Up to \$160	Up to \$200	Up to <b>\$100</b>	
Non-Elective (Medically Necessar	ry) \$0	Up to \$210	\$0	Up to \$210	
Fitting and Evaluation (Standard)	\$0	Up to \$30	Copay not to exceed \$60; 15% discount	Included in contact lens allowance	
Rate Guarantee	Expires 9	/30/2026	Expires 9,	/30/2026	
Monthly Rates Liv	es <sup>1</sup>				
Employee	8 \$9	\$9.83		.11	
Employee + Spouse	3 \$19	\$19.66		\$22.93	
Employee + Child(ren)	3 \$18	\$18.68		.36	
Employee + Family	3 \$29	\$29.36		.98	
Monthly Premium 1	17 \$2	282	\$3	47	
Annual Premium	\$3,	381	\$4,	160	
\$ Increase /(Decrease)	N	/A	\$779		
% Increase /(Decrease)	N	/A	23.	.1%	
	<u> </u>		*		

<sup>&</sup>lt;sup>1</sup> Lives from July Invoice

### **RFP Evaluation - Vision**

**Effective Date: October 1, 2025** 



#### **Current 2024-2025**

#### Alternate #3

Eye Exam Copay \$0 Up to \$30 \$0 Up to \$30 \$0 Varies \$0 Va	Alternate #3		
Eye Exam Copay \$0 Up to \$30 \$0 Up to \$30 \$0 Varies \$0 Va	MetLife - M200D		
Materials Copay Retinal Imaging Up to \$39 Not Covered Up to \$39 Applied allow Frequency Examination Lenses or Contact Lenses Every 12 months E	Network		
Retinal Imaging	o <b>\$45</b>		
Frequency  Examination  Lenses or Contact Lenses  Every 12 months  Every 12 months  Every 12 months  Every 12 months  Every 12 months  Every 12 months  Every 12 months  Every 12 months  Every 24 months  Lenses  Single  Sin	ries		
Examination  Lenses or Contact Lenses  Every 12 months  Every 12 months  Every 12 months  Every 12 months  Every 12 months  Every 12 months  Every 12 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 12 moths  Every 12 moths  Every 12 moths  Every 12 moths  Every 12 moths  Every 12 moths  Every 12 moths  Every 12	to exam vance		
Lenses or Contact Lenses  Frames  Every 12 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 24 months  Every 12 months  Every 24 mother  \$0 Up			
Frames Every 24 months Every 24 months  Lenses  Single \$0 Up to \$25 \$0 Up to \$40 \$0			
Single   \$0			
Single         \$0         Up to \$25         \$0         Up to \$100         Up to \$25         \$0         Up to \$25         \$0         Up to \$25         \$0         Up to \$20         Up to \$20         Up to \$40         \$0         Up to \$20			
Bifocal \$0 Up to \$40 \$0 Up to \$40 Lenticular \$0 Up to \$60 \$0 Up to \$50 Up to \$50 Up to \$55 Up to			
Trifocal \$0 Up to \$60 \$0 Up to \$100 \$0 Up to \$55 Up to \$	o <b>\$30</b>		
Lenticular \$0 Up to \$100 \$0 Up to \$55 Up to \$5	o <b>\$50</b>		
Lenticular \$0 Up to \$100 \$0 Up to \$55 Up to \$5	o <b>\$65</b>		
Standard Progressive \$0 Up to \$40 \$55 Up to \$70 Up to \$40 \$55 Up to \$700 Up to \$200 + 20% off retail Up to \$100 Up to \$200 + 20% off retail Up to \$100 Up to \$200 + 20% off retail Up to \$100 Up to \$2	\$100		
Retail Allowance  Retail Allowance  Up to \$200 + 20% off retail  Up to \$100  Up to \$200 + 20% off retail  Up to \$200 + 20% off retail  Up to \$200 + 20% off retail  Up to \$200 + 20% off retail  Up to \$200 + 20% off retail  Up to \$200 + 20% off retail  Up to \$200 + 20% off retail  Up to \$200 + 20% off retail  Up to \$200 Up to \$200  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Expires 9/30/2026  Expires 9/30/2027  Monthly Rates	o <b>\$50</b>		
Contacts Lenses  Elective   Up to \$200 + 15% off retail   Up to \$160   Up to \$200			
Elective  Non-Elective (Medically Necessary)  Fitting and Evaluation (Standard)  Rate Guarantee  Up to \$200 + 15% off retail  \$0  Up to \$160  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Copay not to exceed Included in allow \$60  Expires 9/30/2026  Expires 9/30/2027	o <b>\$70</b>		
retail  Non-Elective (Medically Necessary)  Fitting and Evaluation (Standard)  Rate Guarantee  Monthly Rates  retail  \$0  Up to \$160  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Up to \$200  Expires 9/30/2026  Expires 9/30/2026  Expires 9/30/2027			
Fitting and Evaluation (Standard)  \$0 Up to \$30  Copay not to exceed sallow allow allow Expires 9/30/2026  Expires 9/30/2026  Expires 9/30/2027  Monthly Rates	\$ <b>105</b>		
Rate Guarantee  Expires 9/30/2026  Expires 9/30/2027  Monthly Rates  Lives 1	\$210		
Monthly Rates Lives 1	contact lens vance		
l			
<b>Employee</b> 8 \$9.83 \$8.33			
<b>Employee + Spouse</b> 3 \$19.66 \$16.70			
<b>Employee + Child(ren)</b> 3 \$18.68 \$14.14			
<b>Employee + Family</b> 3 \$29.36 \$23.32			
Monthly Premium 17 \$282 \$229			
Annual Premium \$3,381 \$2,749			
\$ Increase /(Decrease) N/A -\$631			
% Increase /(Decrease) N/A -18.7%			

<sup>1</sup> Lives from July Invoice

### **RFP Evaluation - Vision**

**Effective Date: October 1, 2025** 



#### **Current 2024-2025**

#### Alternate #4

		Current 2024-2025		Alternate #4		
SCHEDULE OF BENEFITS		Humana -	Vision 200	Principal		
Examination		In-Network	Out-of-Network	In-Network	Out-of-Network	
Eye Exam Copay		\$0	Up to \$30	\$0	Up to <b>\$45</b>	
Materials Copay		\$0	Varies	\$10	Varies	
Retinal Imaging		Up to \$39	Not Covered	Not Provided	Not Provided	
Frequency						
Examination		Every 12	months	Every 12	! months	
Lenses or Contact Lenses		Every 12	months	Every 12	! months	
Frames		Every 24	months	Every 24	months	
Lenses						
Single		\$0	Up to \$25	\$10	Up to <b>\$30</b>	
Bifocal		\$0	Up to \$40	\$10	Up to <b>\$50</b>	
Trifocal		\$0	Up to \$60	\$10	Up to <b>\$65</b>	
Lenticular		\$0	Up to \$100	\$10	Up to \$100	
Standard Progressive		\$0	Up to \$40	\$10	Not Provided	
Frames						
Retail Allowance		Up to \$200 + 20% off retail	Up to \$100	Up to \$200 + 20% off retail	Up to <b>\$70</b>	
Contacts Lenses						
Elective		Up to \$200 + 15% off retail	Up to \$160	Up to \$200	Up to <b>\$105</b>	
Non-Elective (Medically Necess	ary)	\$0	Up to \$210	\$10	Up to \$210	
Fitting and Evaluation (Standar	d)	\$0	Up to \$30	Copay not to exceed \$60	Not Provided	
Rate Guarantee		Expires 9,	/30/2026	Expires 9,	/30/2026	
Monthly Rates L	ives 1					
Employee	8	\$9.83		\$8.04		
Employee + Spouse	3	\$19.66		\$15.26		
Employee + Child(ren)	3	\$18.68		\$16.74		
Employee + Family	3	\$29.36		\$25.69		
Monthly Premium	17	\$2	82	\$2	37	
Annual Premium		\$3,	381	\$2,	849	
\$ Increase /(Decrease)		N,	/A	-\$532		
% Increase /(Decrease)		N,	/A	-15	.7%	

<sup>1</sup> Lives from July Invoice

### **RFP Evaluation - Vision**

**Effective Date: October 1, 2025** 



**Current 2024-2025** 

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	Current 2024-2025		Alternate #5		
SCHEDULE OF BENEFITS	Humana -	Vision 200	UnitedHealthcare - SH509		
Examination	In-Network	Out-of-Network	In-Network	Out-of-Network	
Eye Exam Copay	\$0	Up to \$30	\$0	Up to <b>\$40</b>	
Materials Copay	\$0	Varies	\$0	Varies	
Retinal Imaging	Up to \$39	Not Covered	\$0 (Diabetics only)	Not Covered	
Frequency					
Examination	Every 12	2 months	Every 12	! months	
Lenses or Contact Lenses	Every 12	2 months	Every 12	! months	
Frames	Every 24	l months	Every 24	months	
Lenses					
Single	\$0	Up to \$25	\$0	Up to <b>\$40</b>	
Bifocal	\$0	Up to \$40	\$0	Up to <b>\$60</b>	
Trifocal	\$0	Up to \$60	\$0	Up to <b>\$80</b>	
Lenticular	\$0	Up to \$100	\$0	Up to <b>\$80</b>	
Standard Progressive	\$0	Up to \$40	\$55	Up to <b>\$60</b>	
Frames		· ·			
Retail Allowance	Up to \$200 + 20% off retail	Up to \$100	Up to \$200 + <b>30% off</b> <b>retail</b>	Up to <b>\$45</b>	
Contacts Lenses					
Elective	Up to \$200 + 15% off retail	Up to \$160	Up to \$200	Up to <b>\$175</b>	
Non-Elective (Medically Necessary)	\$0	Up to \$210	\$0	Up to \$210	
Fitting and Evaluation (Standard)	\$0	Up to \$30	\$40	Not Covered	
Rate Guarantee	Expires 9,	Expires 9/30/2026		/30/2026	
Monthly Rates Lives	1				
Employee 8	\$9.83		\$8.94		
Employee + Spouse 3	\$19.66		\$16.95		
Employee + Child(ren) 3	\$18.68		\$19.89		
Employee + Family 3	\$29	\$29.36		.99	
Monthly Premium 17	\$2	\$282		66	
Annual Premium	\$3,	381	\$3,	192	
\$ Increase /(Decrease)	N,	N/A		189	
% Increase /(Decrease)	N,	/A	-5.	6%	

<sup>1</sup> Lives from July Invoice

### **RFP Evaluation - Vision**

**Effective Date: October 1, 2025** 



#### Current 2024-2025

#### Alternate #5

		Current 2024-2025		Alternate #5		
SCHEDULE OF BENEFITS		Humana -	Vision 200	Unum - EyeMed Plan		
Examination		In-Network	Out-of-Network	In-Network	Out-of-Network	
Eye Exam Copay		\$0	Up to \$30	\$10	Up to <b>\$40</b>	
Materials Copay		\$0	Varies	\$25	Varies	
Retinal Imaging		Up to \$39	Not Covered	Up to \$39	Not Covered	
Frequency						
Examination		Every 12	months	Every 12	! months	
Lenses or Contact Lenses		Every 12	! months	Every 12	! months	
Frames		Every 24	months	Every 24	months	
Lenses						
Single		\$0	Up to \$25	\$25	Up to <b>\$30</b>	
Bifocal		\$0	Up to \$40	\$25	Up to <b>\$50</b>	
Trifocal		\$0	Up to \$60	\$25	Up to <b>\$70</b>	
Lenticular		\$0	Up to \$100	\$25	Up to <b>\$70</b>	
Standard Progressive		\$0	Up to \$40	\$90	Up to <b>\$50</b>	
Frames						
Retail Allowance		Up to \$200 + 20% off retail	Up to \$100	Up to \$200 + 20% off retail	Up to <b>\$140</b>	
Contacts Lenses						
Elective		Up to \$200 + 15% off retail	Up to \$160	Up to \$200	Up to <b>\$200</b>	
Non-Elective (Medically Neces	sary)	\$0	Up to \$210	\$0	Up to \$210	
Fitting and Evaluation (Standar	rd)	\$0	Up to \$30	\$40	Not Covered	
Rate Guarantee		Expires 9,	/30/2026	Expires 9,	/30/2026	
Monthly Rates	Lives 1					
Employee	8	\$9.	83	\$6.46		
Employee + Spouse	3	\$19.66		\$12.91		
Employee + Child(ren)	3	\$18.68		\$14.41		
Employee + Family	3	\$29.36		\$22	.53	
Monthly Premium	17	\$2	82	\$2	01	
Annual Premium		\$3,	381	\$2,	415	
\$ Increase /(Decrease)		N/A		-\$9	966	

<sup>1</sup> Lives from July Invoice

## RFP Evaluation - Basic Life and AD&D

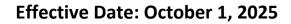
Effective Date: October 1, 2025



Humana	Guardian
All active employees working 30 hours/week	All active employees working 30 hours/week
\$25,000	\$25,000
Equal to Life Benefit	2x Life Benefit to Max of \$25,000
No/Yes	Yes/Yes
Included	Included
35% at age 65 55% at age 70 70% at age 75 80% at age 80 85% at age 85	35% at age 65 55% at age 70 70% at age 75 80% at age 80
50% of the Basic Life Benefit	50% of the Basic Life Benefit
Expires 9/30/2025	Expires 9/30/2027
*	
\$666,300	\$666,300
\$0.310	\$0.401
\$0.030	\$0.020
\$0.340	\$0.421
\$227	\$281
\$2,719	\$3,366
N/A	\$648
N/A	23.8%
	All active employees working 30 hours/week \$25,000  Equal to Life Benefit  No/Yes  Included  35% at age 65 55% at age 70 70% at age 75 80% at age 80 85% at age 85 50% of the Basic Life Benefit  Expires 9/30/2025  *  \$666,300 \$0.310 \$0.030 \$0.340  \$227 \$2,719 N/A

<sup>\*</sup>Lives and volume from July invoice

## RFP Evaluation - Basic Life and AD&D





Schedule of Benefits	Humana	MetLife
Life and AD&D Benefit		
Eligibility	All active employees working 30 hours/week	All active employees working 40 hours/week
Basic Term Life	\$25,000	\$25,000
Basic AD&D	Equal to Life Benefit	Equal to Life Benefit
Features		
Portability/Conversion Privilege	No/Yes	No/Yes
Waiver of Premium	Included	Included
Age Reduction (Reduces By)	35% at age 65 55% at age 70 70% at age 75 80% at age 80 85% at age 85	35% at age 65 50% at age 70
Accelerated Death Benefit	50% of the Basic Life Benefit	80% of the Basic Life Benefit
Rate Guarantee	Expires 9/30/2025	Expires 9/30/2026
Rates Lives	*	
Volume 27	\$666,300	\$666,300
Basic Term Life Rate / \$1,000	\$0.310	\$0.240
AD&D Rate / \$1,000	\$0.030	\$0.020
Total Life AD&D Rate / \$1,000	\$0.340	\$0.260
Monthly Premium	\$227	\$173
Annual Premium	\$2,719	\$2,079
\$ Increase /(Decrease)	N/A	-\$640
% Increase /(Decrease)	N/A	-23.5%

<sup>\*</sup>Lives and volume from July invoice

## RFP Evaluation - Basic Life and AD&D

**Effective Date: October 1, 2025** 



	Current 2024-2025	Alternate #3
	Humana	Principal
	All active employees working 30 hours/week	All active employees working 30 hours/week
	\$25,000	\$25,000
	Equal to Life Benefit	Equal to Life Benefit
	No/Yes	No/Yes
	Included	Included
	35% at age 65 55% at age 70 70% at age 75 80% at age 80 85% at age 85	35% at age 65 50% at age 70
	50% of the Basic Life Benefit	<b>75%</b> of the Basic Life Benefit
	Expires 9/30/2025	Expires 9/30/2027
Lives*		
27	\$666,300	\$666,300
	\$0.310	\$0.294
	\$0.030	\$0.025
	\$0.340	\$0.319
	\$227	\$213
	\$2,719	\$2,551
	N/A	-\$168
	N/A	-6.2%
		### Humana  All active employees working 30 hours/week  \$25,000  Equal to Life Benefit  No/Yes  Included  35% at age 65 55% at age 70 70% at age 75 80% at age 80 85% at age 85 50% of the Basic Life Benefit  Expires 9/30/2025  Lives*  27 \$666,300 \$0.310 \$0.030 \$0.340  \$227 \$2,719 N/A

<sup>\*</sup>Lives and volume from July invoice

## RFP Evaluation - Basic Life and AD&D

Effective Date: October 1, 2025



Alternate #4

#### Current 2024-2025

Schedule of Benefits		Humana	UnitedHealthcare
Life and AD&D Benefit			
Eligibility		All active employees working 30 hours/week	All active employees working 30 hours/week
Basic Term Life		\$25,000	\$25,000
Basic AD&D		Equal to Life Benefit	Equal to Life Benefit
Features			
Portability/Conversion Privilege		No/Yes	No/Yes
Waiver of Premium		Included	Included
Age Reduction (Reduces By)		35% at age 65 55% at age 70 70% at age 75 80% at age 80 85% at age 85	35% at age 65 50% at age 70
Accelerated Death Benefit		50% of the Basic Life Benefit	50% of the Basic Life Benefit
Rate Guarantee		Expires 9/30/2025	Expires 9/30/2027
Rates	Lives*		
Volume	27	\$666,300	\$666,300
Basic Term Life Rate / \$1,000		\$0.310	\$0.480
AD&D Rate / \$1,000		\$0.030	\$0.020
Total Life AD&D Rate / \$1,000		\$0.340	\$0.500
Monthly Premium		\$227	\$333
Annual Premium		\$2,719	\$3,998
\$ Increase /(Decrease)		N/A	\$1,279
% Increase /(Decrease)		N/A	47.1%

<sup>\*</sup>Lives and volume from July invoice

## RFP Evaluation - Basic Life and AD&D

Effective Date: October 1, 2025



#### **Current 2024-2025**

		Current 2024-2025	Alternate #5
Schedule of Benefits		Humana	Unum
Life and AD&D Benefit			
Eligibility		All active employees working 30 hours/week	All active employees working 30 hours/week
Basic Term Life		\$25,000	\$25,000
Basic AD&D		Equal to Life Benefit	Equal to Life Benefit
Features			
Portability/Conversion Privilege		No/Yes	<b>Yes</b> /Yes
Waiver of Premium		Included	Included
Age Reduction (Reduces By)		35% at age 65 55% at age 70 70% at age 75 80% at age 80 85% at age 85	35% at age 65 55% at age 70 70% at age 75 80% at age 80
Accelerated Death Benefit		50% of the Basic Life Benefit	50% of the Basic Life Benefit
Rate Guarantee		Expires 9/30/2025	Expires 9/30/2027
Rates	Lives*		
Volume	27	\$666,300	\$666,300
Basic Term Life Rate / \$1,000		\$0.310	\$0.320
AD&D Rate / \$1,000		\$0.030	\$0.050
Total Life AD&D Rate / \$1,000		\$0.340	\$0.370
Monthly Premium		\$227	\$247
Annual Premium		\$2,719	\$2,958
\$ Increase /(Decrease)		N/A	\$240
% Increase /(Decrease)		N/A	8.8%

<sup>\*</sup>Lives and volume from July invoice

Effective Date: October 1, 2025



Current 2024-2025	Alternate #1
Current 2024-2025	Alternate #.

	Current 2024-2025 Alternate #1		nate #1	
Schedule of Benefits	Hun	nana	Gua	rdian
Eligibility		mployees working 30 /week	All active Full Time employees working hours/week	
Employee		Increments of \$1,000 to the lesser of \$1,000,000 or 7x salary		000 up to <b>\$250,000</b>
Guarantee Issue	\$75,000 \$100		0,000	
Spouse	Increments of \$1,000 up to \$500,000 Increments of \$5,000 up 100% of EE Amount (\$1			
Guarantee Issue	\$35	,000	\$25	,000
Child	Birth - 14 days: 6 months and older: \$10,000  Birth - 14 days: 14 days and older: Increm a max of \$10,000 NTE 100		crements of \$1,000 to	
Guarantee Issue	\$10	,000	\$10	,000
AD&D Benefit	100% of L	ife Benefit	100% of L	ife Benefit
Age Reduction (Reduces By)	Age 7 Age 7 Age 8	5: 35% 0: 55% 5: 70% 0: 80% 5: 85%	Age 65: 35% Age 70: 55% Age 75: 70% Age 80: 80%	
Portability/Conversion Option	Yes	Yes/Yes Yes/Yes		/Yes
Annual Enrollment Option	· · ·	may add or increase up to \$25,000.	At OE, employees may increase the coverage by an electable amount u \$50,000, not to exceed the Guaran Issue.	
Minimum Participation	Curi	rent		6 or 10 enrolled
Rate Guarantee	Expires 9/30/2025		-	/30/2027
nate Gaarantee	Expires 5	Spouse (Based on	Expires 5	Spouse* (Based on
Rates per \$1,000	Employee	Spouse age)	Employee	<u>Employee</u> age)
<25	\$0.060	\$0.060	\$0.074	\$0.074
25 - 29	\$0.060	\$0.060	\$0.074	\$0.074
30 - 34	\$0.070	\$0.070	\$0.080	\$0.080
35 - 39	\$0.090	\$0.090	\$0.108	\$0.108
40 - 44	\$0.140	\$0.130	\$0.155	\$0.155
45 - 49	\$0.220	\$0.210	\$0.246	\$0.246
50 - 54	\$0.350	\$0.330	\$0.403	\$0.403
55 - 59 60 - 64	\$0.550	\$0.520	\$0.630	\$0.630
60 - 64 65 - 60	\$0.780	\$0.740 \$1.310	\$0.900 \$1.600	\$0.900
65 - 69 70 - 74	\$1.280	\$1.210	\$1.600	\$1.600
70 - 74 75 - 70	\$2.490	\$2.370	\$3.109 \$3.100	-
75 - 79 80+	\$4.810	\$4.580	\$3.109 \$3.100	_
	\$8.980	\$8.530	\$3.109	
Child(ren) - per \$10,000		000	· ·	550 120
AD&D - Employee/Spouse	<b>\$</b> 0.	030	\$0.032 (Child AD&D Available 120	

**Effective Date: October 1, 2025** 



	Current 2024-2025 Altern		nate #Z	
Schedule of Benefits	Hur	nana	Me	tLife
Eligibility		mployees working 30 /week	All active Full Time employees worl hours/week	
Employee	Increments of \$1,000 to the lesser of \$1,000,000 or 7x salary		Increments of \$10,000 to the lesse \$500,000 or 5x salary	
Guarantee Issue	\$75	,000	\$100,000	
Spouse	Increments of \$1,0	000 up to \$500,000	Increments of \$5,000 up to \$100,000 50% of EE Amount	
Guarantee Issue	\$35	,000	\$25	5,000
Child	•	nonths: \$500, older: \$10,000	15 days - 6 months: <b>\$1,000</b> , 6 months and older: \$10,000	
Guarantee Issue	\$10	,000	\$10	),000
AD&D Benefit	100% of L	ife Benefit	100% of I	ife Benefit
Age Reduction (Reduces By)	Age 7 Age 7 Age 8	5: 35% 0: 55% 5: 70% 0: 80% 5: 85%	None	
Portability/Conversion Option	Yes	/Yes	Yes/Yes	
Annual Enrollment Option		may add or increase up to \$25,000.	At OE, employees may increase thei coverage to the next benefit level with EOI up to the GI.	
Minimum Participation	Cur	rent	Greater of 449	% or 12 enrolled
Rate Guarantee	Expires 9/30/2025		_	0/30/2027
Rates per \$1,000	Employee	Spouse (Based on Spouse age)	Employee	Spouse (Based on Employee age)
<25 25 - 29 30 - 34 35 - 39 40 - 44 45 - 49 50 - 54 55 - 59 60 - 64 65 - 69 70 - 74 75 - 79 80+	\$0.060 \$0.060 \$0.070 \$0.090 \$0.140 \$0.220 \$0.350 \$0.550 \$0.780 \$1.280 \$2.490 \$4.810 \$8.980	\$0.060 \$0.060 \$0.070 \$0.090 \$0.130 \$0.210 \$0.330 \$0.520 \$0.740 \$1.210 \$2.370 \$4.580 \$8.530	\$0.080 \$0.080 \$0.092 \$0.126 \$0.171 \$0.253 \$0.402 \$0.728 \$1.381 \$2.335 \$4.343 \$4.343	\$0.080 \$0.080 \$0.092 \$0.126 \$0.171 \$0.253 \$0.402 \$0.728 \$1.381 \$2.335 \$4.343 \$4.343
Child(ren) - per \$10,000		000	·	400
AD&D - Employee/Spouse	\$0.	\$0.030		0.051 (Child) 121

**Effective Date: October 1, 2025** 



	Current 2	2024-2025	Alternate #3		
Schedule of Benefits	Hun	nana	Prin	ıcipal	
Eligibility		mployees working 30 /week	All active Full Time employees workir hours/week		king 30
Employee	Increments of \$1,000 to the lesser of \$1,000,000 or 7x salary		,000 up to <b>\$30</b>	0,000	
Guarantee Issue	\$75	,000	Under age 70: \$100,000 70+: \$10,000		
Spouse	Increments of \$1,0	000 up to \$500,000	Increments of \$5,000 up to <b>\$100,000</b> 100% of EE Amount		00 NTE
Guarantee Issue	\$35	,000	_	70: <b>\$25,000</b> <b>610,000</b>	
Child		nonths: \$500, older: \$10,000	Birth - 14 days: <b>\$1,000</b> , <b>14 days</b> and older: \$5,000 or \$10,000 l 100% of EE Amount		000 NTE
Guarantee Issue	\$10	,000	\$10	,000	
AD&D Benefit	100% of L	ife Benefit	100% of I	ife Benefit	
Age Reduction (Reduces By)	Age 7 Age 7 Age 8	5: 35% 0: 55% 5: 70% 0: 80% 5: 85%	Age 65: 35% Age 70: 50%		
Portability/Conversion Option	Yes	/Yes	Yes/Yes		
Annual Enrollment Option	· · · · · · · · · · · · · · · · · · ·	may add or increase up to \$25,000.	I or increase coverage iin to two		
Minimum Participation	Current		Greater of 20	% or 5 enrolled	d
Rate Guarantee	Expires 9/30/2025		_	)/30/2027	
Rates per \$1,000	Employee	Spouse (Based on Spouse age)	Employee	Spouse (Bas Spouse a	
<25 25 - 29 30 - 34 35 - 39 40 - 44 45 - 49 50 - 54 55 - 59 60 - 64 65 - 69 70 - 74 75 - 79 80+	\$0.060 \$0.060 \$0.070 \$0.090 \$0.140 \$0.220 \$0.350 \$0.550 \$0.780 \$1.280 \$2.490 \$4.810 \$8.980	\$0.060 \$0.060 \$0.070 \$0.090 \$0.130 \$0.210 \$0.330 \$0.520 \$0.740 \$1.210 \$2.370 \$4.580 \$8.530	\$0.093 \$0.093 \$0.113 \$0.143 \$0.234 \$0.346 \$0.565 \$0.912 \$1.241 \$1.996 \$3.442 \$3.442 \$3.442	\$0.09 \$0.09 \$0.11 \$0.14 \$0.23 \$0.34 \$0.56 \$0.91 \$1.24 \$1.99 \$3.44 \$3.44	3 3 4 6 5 2 1 6 2 2
Child(ren) - per \$10,000 AD&D - Employee/Spouse		\$2.000 \$0.030		.000	
	, , , , , , , , , , , , , , , , , , , ,	-	ŞU.U25		

Effective Date: October 1, 2025



#### Current 2024-2025

### Alternate #4

Schedule of Benefits	Hun	nana	UnitedHealthcare		
Eligibility		mployees working 30 /week	All active Full Time employees workir hours/week		
Employee		Increments of \$1,000 to the lesser of \$1,000,000 or 7x salary		crements of \$10,000 up to <b>\$300,000</b>	
Guarantee Issue	\$75,000 \$50,000		,000		
Spouse	Increments of \$1,0	000 up to \$500,000	Increments of \$10,000 up to <b>\$150,00</b>		
Guarantee Issue	\$35	,000	\$30	,000	
Child	•	nonths: \$500, older: \$10,000	Increments of \$5,	000 up to <b>\$15,000</b>	
Guarantee Issue	\$10	,000	\$15	5,000	
AD&D Benefit	100% of L	ife Benefit	100% of Life Benefit		
Age Reduction (Reduces By)	Age 70 Age 79 Age 80	5: 35% 0: 55% 5: 70% 0: 80% 5: 85%	Age 65: 35% Age 70: 55% Age 75: 70% Age 80: 80% Age 85: 85%		
Portability/Conversion Option	Yes,	/Yes	Yes/No		
Annual Enrollment Option		nay add or increase up to \$25,000.	None		
Minimum Participation	Curi	rent	25% of	eligible	
Rate Guarantee	Expires 9	/30/2025		/30/2026	
Rates per \$1,000	Employee	Spouse (Based on Spouse age)	Employee	Spouse (Based on Spouse age)	
<25 25 - 29 30 - 34 35 - 39 40 - 44 45 - 49 50 - 54 55 - 59 60 - 64 65 - 69 70 - 74 75 - 79 80+	\$0.060 \$0.060 \$0.070 \$0.090 \$0.140 \$0.220 \$0.350 \$0.550 \$0.780 \$1.280 \$2.490 \$4.810 \$8.980	\$0.060 \$0.060 \$0.070 \$0.090 \$0.130 \$0.210 \$0.330 \$0.520 \$0.740 \$1.210 \$2.370 \$4.580 \$8.530	\$0.060 \$0.070 \$0.080 \$0.110 \$0.160 \$0.260 \$0.420 \$0.640 \$0.870 \$1.400 \$2.360 \$6.990	\$0.060 \$0.070 \$0.080 \$0.110 \$0.160 \$0.260 \$0.420 \$0.640 \$0.870 \$1.400 \$2.360 \$6.990 \$6.990	
Child(ren) - per \$10,000	\$2.0			000	
AD&D - Employee/Spouse	\$0.	030	\$0.020 (Child A	AD&D Available 123	

**Effective Date: October 1, 2025** 



Engionity		Current 2		Aiter	
Increments of \$1,000 to the lesser of \$1,000 to the lesser of \$1,000 to the lesser of \$1,000 to \$500,000 or \$x salary	of Benefits	Hum	nana	Ur	num
S1,000,000 or 7x salary   S500,000 or 5x salary   S500,000 or 5x salary   S500,000 or 5x salary   S500,000 or 5x salary   S500,000 or 5x salary   S500,000 or 5x salary   S500,000   S10,000 or Example   S15,000   S15,000   S15,000   S15,000   S15,000   S15,000   S15,000   S15,000   S15,000   S15,000   S15,000   S15,000   S15,000   S10,000   S1				All active Full Time employees workin hours/week	
Spouse   Increments of \$1,000 up to \$500,000   Increments of \$5,000 up to 100% of EE Amo 100%				Increments of \$10,000 to the lesser of \$500,000 or 5x salary	
Guarantee Issue \$35,000 \$15,000 \$10,000 \$15,0	ee Issue	\$75,	,000	\$100,000	
## Child ##		I increments of ST 000 up to S500 000 I		•	
Child         15 days - 6 months: \$500, 6 months and older: Increm to a max of \$10,000 NTE Amount         6 months and older: \$10,000         6 months and older: \$10,000 NTE to a max of \$10,000 NTE Amount           Guarantee Issue         \$10,000         \$10,000         \$10,000           AD&D Benefit         100% of Life Benefit         100% of Life Benefit         100% of Life Benefit           Age 76: 55%         Age 75: 70%         Age 75: 70%         Age 70: 55%         Age 70: 55%         Age 75: 70%         ssue</td> <td>\$35,</td> <td>,000</td> <td>\$15</td> <td>5,000</td>	ee Issue	\$35,	,000	\$15	5,000
AD&D Benefit         100% of Life Benefit         100% of Life Benefit           Age 65: 35% Age 70: 55% Age 70: 55% Age 70: 55% Age 80: 80% Age 80: 80% Age 85: 85%         Age 65: 35% Age 70: 55% Age 70: 55% Age 75: 70% Age 80: 80% Age 80: 80%           Portability/Conversion Option         Yes/Yes         Yes/Yes           Annual Enrollment Option         At OE, employees may add or increase coverage by up to \$25,000.         None           Minimum Participation         Current         Greater of 41% or 10           Rate Guarantee         Expires 9/30/2025         Expires 9/30/202           Rates per \$1,000         Employee         Spouse (Based on Spouse age)         Spouse 30/202           <25		•		Birth - 6 months: \$1,000 6 months and older: Increments of \$2,0 to a max of \$10,000 NTE 100% of EE Amount	
Age Reduction (Reduces By)  Age Reduction (Reduces By)  Age Reduction (Reduces By)  Age Reduction (Reduces By)  Age Reduction (Reduces By)  Age Reduction (Reduces By)  Age Reduction (Reduces By)  Age Reduction (Reduces By)  Age Ro: 80%  Age 80: 80%  Age 80: 80%  Age 80: 80%  Age 80: 80%  Age 80: 80%  Age 80: 80%  Age 80: 80%  Age 80: 80%  Age 80: 80%  Age 80: 80%  Age 80: 80%  Age 80: 80%  Age 80: 80%  Age 80: 80%  Age 80: 80%  Age 70: 55%  Age 70: 50%  Age 80: 80%  Ag	ee Issue	\$10,	,000	\$10	0,000
Age Reduction (Reduces By)  Age Reduction (Reduces By)  Age 70: 55% Age 70: 55% Age 70: 55% Age 70: 55% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 70: 55% Age 70: 50% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age 80: 80% Age 75: 70% Age Age 75: 70% Age Age 75: 70% Age Age 75: 70% Age Age 75: 70% Age Age 75: 70% Age Age 75: 70% Age Age 75: 70% Age Age 75: 70% Age Age 75: 70% Age Age 75: 70% Age Ag	nefit	100% of L	ife Benefit	100% of I	Life Benefit
Annual Enrollment Option  At OE, employees may add or increase coverage by up to \$25,000.  Minimum Participation  Rate Guarantee  Expires 9/30/2025  Expires 9/30/2025  Expires 9/30/2025  Expires 9/30/2025  Expires 9/30/2025  Expires 9/30/2025  Expires 9/30/2025  Expires 9/30/2025  Expires 9/30/2025  Expires 9/30/2025  Expires 9/30/2025  Expires 9/30/2025  Expires 9/30/2025  Expires 9/30/2025  Expires 9/30/202  Spouse (Based on Spouse age)  \$25	ction (Reduces By)	Age 70 Age 75 Age 80	D: 55% 5: 70% D: 80%	Age 65: 35% Age 70: 55% Age 75: 70% Age 80: 80%	
Annual Enrollment Option    Coverage by up to \$25,000.	//Conversion Option	Yes,	/Yes	Yes/Yes	
Rate Guarantee         Expires 9/30/2025         Expires 9/30/2025           Rates per \$1,000         Employee         Spouse (Based on Spouse age)         Employee         Spouse 30           <25	rollment Option		•	None	
Rate Guarantee         Expires 9/30/2025         Expires 9/30/2025           Rates per \$1,000         Employee         Spouse (Based on Spouse age)         Employee         Spouse (Based on Spouse age)         Spouse age)         \$0.090         \$0.090         \$0.090         \$0.090         \$0.110	Participation	Curr	ent	Greater of 419	% or 10 enrolled
Spouse (Based on Spouse age)   Employee   Spouse (Based on Spouse age)   Spouse (Based on S				•	
Spouse age   Spo					Spouse (Based on
<25	\$1,000	Employee	•	Employee	Spouse age)
70 - 74       \$2.490       \$2.370       \$3.180         75 - 79       \$4.810       \$4.580       \$11.240         80+       \$8.980       \$8.530       \$11.240	25 - 29 30 - 34 35 - 39 40 - 44 45 - 49 50 - 54 55 - 59 60 - 64 65 - 69 70 - 74 75 - 79 80+	\$0.060 \$0.070 \$0.090 \$0.140 \$0.220 \$0.350 \$0.550 \$0.780 \$1.280 \$2.490 \$4.810 \$8.980	\$0.060 \$0.070 \$0.090 \$0.130 \$0.210 \$0.330 \$0.520 \$0.740 \$1.210 \$2.370 \$4.580 \$8.530	\$0.110 \$0.160 \$0.240 \$0.340 \$0.530 \$0.740 \$1.130 \$1.410 \$1.730 \$3.180 \$11.240	\$0.090 \$0.110 \$0.160 \$0.240 \$0.340 \$0.530 \$0.740 \$1.130 \$1.410 \$1.730 \$3.180 \$11.240
<b>Child(ren) - per \$10,000</b> \$2.000 <b>\$3.000</b>	Child(ren) - per \$10,000	\$2.0	000	\$3.	
AD&D - Employee/Spouse \$0.030 \$0.030 (Child AD&D A	AD&D - Employee/Spouse			\$0.030 (Child AD&D Available 124	

### **Summary of Costs - Dental**

**Effective Date: October 1, 2025** 



Summary	Current	Renewal	Alternate #1	Alternate #2	Alternate #3	Alternate #4a	Alternate #4b	Alternate #5*
Dental	Humana	Humana	Guardian	MetLife	Principal	UnitedHealthcare	UnitedHealthcare	Unum
Dental PPO	\$9,568	\$10,676	\$8,298	\$11,386	\$9,760	\$10,554	\$10,554	\$16,891
Difference From Current	N/A	\$1,107	-\$1,271	\$1,818	\$192	\$986	\$986	\$7,323
Dental HMO	\$2,000	\$2,000	\$2,224	\$1,660	\$1,693	\$1,974	\$1,836	Not Quoted
Difference From Current	N/A	\$0	\$224	-\$340	-\$307	-\$26	-\$165	N/A
TOTAL COST	\$11,568	\$12,676	\$10,522	\$13,046	\$11,453	\$12,528	\$12,390	\$16,891
TOTAL \$ Increase /(Decrease)	N/A	\$1,107	-\$1,047	\$1,478	-\$116	\$960	\$821	\$5,323
TOTAL % Increase /(Decrease)	N/A	9.6%	-9.0%	12.8%	-1.0%	8.3%	7.1%	46.0%

\*Unum did not quote a DHMO product. Costs above assume 100% enrollment in DPPO product.





#### **AGENDA**

#### **MEMORANDUM**

TO: Honorable Mayor & City Commissioners

VIA: Michael E. Jackson, City Manager

FROM: Office of the City Clerk

SUBJECT: Pahokee Middle/Senior High 2025 Homecoming Parade

DATE: September 18, 2025

#### **GENERAL SUMMARY/BACKGROUND:**

Pahokee Middle/Senior High School will hold its Annual Homecoming Parade on October 3, 2025. In order to do so, the City Commission must formally approve the parade and authorize an application to be completed with the Florida Department of Transportation.

#### **BUDGET IMPACT:**

The City will not incur any cost for approving the parade. All costs associated with the permit, will be incurred by Pahokee Middle/Senior High School.

#### **LEGAL NOTE:**

Defer to the City Attorney.

### **STAFF RECOMMENDATION:**

Staff recommends approval of the item.

#### **ATTACHMENTS**:

Resolution 2025-60

#### **RESOLUTION 2025-60**

A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF FLORIDA. APPROVING THE **PAHOKEE** PAHOKEE. MIDDLE/SENIOR HIGH SCHOOL 2025 **HOMECOMING** PARADE AND AUTHORIZING AN APPLICATION FOR A PARADE PERMIT FROM THE FLORIDA DEPARTMENT OF TRANSPORTATION: PROVIDING **FOR ADOPTION** REPRESENTATIONS; PROVIDING FOR AN EFFECTIVE DATE.

**WHEREAS**, the Pahokee Middle/Senior High School desires to hold a 2025 Homecoming Parade on October 3, 2025 at 2:00 PM; and

WHEREAS, in order for the Homecoming Parade to be held, a permit from the Florida Department of Transportation ("FDOT") is required to close the roads along the parade route set forth on attached Exhibit "A;" and

**WHEREAS**, the City Commission of the City of Pahokee ("City Commission") desires to approve a homecoming parade and further desires to authorize an application to be completed with the Florida Department of Transportation; and

**WHEREAS**, in order to secure a permit, the Florida Department of Transportation requires a formal Resolution from the City Commission showing approval of the Homecoming Parade.

# NOW, THEREFORE BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA AS FOLLOWS:

<u>Section 1.</u> <u>Adoption of Representations</u>. The foregoing "Whereas" clauses are hereby ratified and confirmed as being true and the same are hereby made a specific part of this Resolution.

<u>Section 2.</u> <u>Approval of Parade</u>. The City Commission hereby approves the Homecoming Parade to be held by Pahokee Middle/Senior High School on October 3, 2025 at 2:00 PM.

<u>Section 3.</u> <u>Authorization of Permit Application</u>. The City Commission hereby authorizes the application of a permit to be applied for from the Florida Department of Transportation for the Pahokee Middle/Senior High School Homecoming Parade.

<u>Section 4.</u> <u>Effective Date</u>. This Resolution shall be effective immediately upon its passage and adoption.

**PASSED** and **ADOPTED** this <u>23rd</u> day of September, 2025. Keith W. Babb, Jr., Mayor **ATTEST:** Nylene Clarke, CMC, City Clerk APPROVED AS TO FORM AND **LEGAL SUFFICIENCY:** Burnadette Norris-Weeks, Esq. City Attorney Moved by: \_\_\_\_\_ Seconded by: VOTE: Mayor Babb \_\_\_\_(Yes) \_\_\_\_(No) \_\_\_\_(Yes) \_\_\_\_(No) Vice Mayor Cowan-Williams Commissioner McDonald \_\_\_\_\_(Yes) \_\_\_\_\_(No) Commissioner McPherson \_\_\_\_(Yes) \_\_\_\_(No)

\_\_\_\_ (Yes) \_\_\_\_ (No)

Commissioner Scott

## EXHIBIT "A"

## HOMECOMING PARADE APPLICATION

(ATTACHED)



207 Begonia Drive Pahokee, Florida 33476 Phone: (561) 924-5534 Fax: (561) 924-8140

# Request for Temporary Road Closing / Special Use Permit (Parade Permit Application checklist)

The following are items required by you, the permittee/applicant, for the temporary closing and special use of State Roads, and must be submitted with the application. Incomplete applications will not be reviewed and will be returned to the applicant for completion.

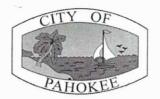
City of Pahokee's Parade Permit Application with all required original signatures.
<ul> <li>Florida Department of Transportation (FDOT) Application/form(s) with all required <u>original signatures</u>.</li> <li>Signatures include: Applicant, Authorized Agent from Palm Beach County Sheriff's Office (PBSO), and Authorized City Official (Mayor or City Manager).</li> <li>Event Permit Application Checklist and District 4 Road Closure Event Notice must be included in packet.</li> </ul>
<ul> <li>Map of the route the parade will be traveling (map must be legible)</li> <li>Indicate starting point, ending location, and detour route.</li> <li>Please use blue or red ink to indicate the respective routes on the map.</li> <li>Map must meet FDOT's standards (reference Event Permit Application Checklist).</li> </ul>
<ul> <li>Letter from PBSO, stating they will provide traffic control (include in application packet).</li> <li>An application for hiring off duty officers is included in this packet. You must complete and submit it to PBSO (required, prior to receiving the letter from PBSO).</li> </ul>
Executed and certified copy of a resolution from the City Commission, authorizing the respective parade date and parade route.
Certificate of Insurance (COI) listing Florida Department of Transportation as the certificate holder.  COI must include the respective FDOT permit number.  • FDOT's Address: 7900 Forest Hill Boulevard, West Palm Beach, Florida 33413.

It is your responsibility as the permittee/applicant to ensure all requirements of the application are satisfied. Once the application has been reviewed by City Administration, and if the application is found to be complete, the application will be submitted to DBI Services Corp/FDOT for review and authorization.

Should there be any questions or concerns regarding road closure, please contact the following agency:

DBI Services Corp. (561) 992-1318 Fax: (561) 993-9000 2728 State Road 15 Belle Glade, FL 33430

Section I, Item 5.



## City of Pahokee

207 Begonia Drive Pahokee, Florida 33476 Phone: (561) 924-5534 Fax: (561) 924-8140

### **Parade Permit Application**

A thirty (30) day advance notice is requested, in order to effectively monitor and control the flow of traffic, and the safety of the citizens, in the areas of the parade. Off duty police officers with cars are required. You must apply for a permit for the off duty officers (see attached application). **Application and payment must be submitted to Palm Beach County Sheriff's Office (PBSO) prior to an authorization signature on this page.** 

Date of Application: 9325	
Location of Proposed Use:	
Larrimore Road Fast Main Street, South take Ave, Barack Obserna Blvd	
Name of Group/Organization: Contact Phone Number: Date of Parade: Type of Parade: Start Time and End Time of Parade: Approximate Number of Participants: Number of Vehicles Participating:	Pahokee High School (361) 449 3524 Oct. 3, 2025 Homecoming 2pm-5pm 200 30
Applicant's Signature  Janay Mullins Vereer	Data
Applicant's Name (print)  Lt. Seth D. Perrin, PBSO	0 9/04/2025 Date
Approved Denied	

Note: A photocopy of this application will serve as the permit card

### SHERIFF'S OFFICE

Section I. Item 5.

#### APPLICATION FOR OFF-DUTY PERMIT

All services provided by PBSO deputies within the scope of off-duty permits are regulated by applicable Florida Statutes, PBC Ordinances, PBSO General Orders/Directives, and training. It is understood that this is a non-binding agreement on PBSO as there is no guarantee that the requested off-duty permit will be staffed. Every effort will be made to provide staffing for your event. If your off-duty permit is not staffed, we will reimburse the payment or credit the account. You may contact the Off-Duty Permits Office during regular business hours to confirm your event has been staffed. Regular business hours are Monday - Friday, 8:30 a.m. to 5:00 p.m. Off-duty permit requests must be received a minimum of ten (10) business days prior to the event, unless exigent circumstances apply as determined by the Off-Duty Permits Office. Requests for service with less than 10 business days the event may require the premium rate. as determined by the Off-duty Permits Office supervision. Return the application via email to PermitsDL@pbso.org.

To cancel an off-duty permit during regular business hours, you must send an email to PermitsDL@pbso.org. A refund/credit will be issued. For cancellations after business hours or weekends, call (561) 688-3400 and ask to speak to the Off-Duty Permits Supervisor.

Cancellations received within 24 hours of the event will be subject to the 4 hour minimum charge per deputy.

Note: Checks with a P.O. Box are not accepted. Florida Statutes 30.2905 & 30.51 require payment be received prior to the performance of off-duty law enforcement services.

lourly Rates (4 Hour Minimum per Deputy) Eff. 1/1/2022			Payment Methods Upon Receipt of Invoice
Regular	Premium		Check or Money Order made payable to:
\$ 68.00	\$ 88.00	Deputy Sheriff	Palm Beach County Sheriff's Office PO Box 24681
\$ 75.00	\$ 95.00	Sergeant	West Palm Beach, FL 33416-4681
\$ 82.00	\$ 102.00	Lieutenant/Captain	Credit Card

Premium Rates apply on: New Year's Eve and Day, Super Bowl Sunday, Easter, Memorial Day, Independence Day, Labor Day, Halloween, Thanksgiving Day, and Christmas Eve & Day

manksgiving Day, and Crinstinas Eve & Day
Applicant Information
Business Name: Pahokee Hah School
Applicant Name: Janay Multins Vercen
Email: Janay, Mullinse palmbeach schools, org Phone No: (561) 449-3524
Mailing Address: 900 Larrimore Road Pahokee ft 33476
Contact Person at Event: Janay Mulling Versen Phone No: (561) 449-3524
Address of Event: Begin at 900 Larrimure Road, Event Map Attached
Type of Event: Homeroming Parade No. Attending: 200 Will Alcohol be Served?
Detail Date From: 10 3 25 To: 10 3 25 Start Time: 10m End Time (4 Hour Min.): 5pm
No. of Deputies: Specific Instructions For Deputies:
**One sergeant is needed for every five deputies. A lieutenant and/or captain may be required for large events. Call for more information.
Applicant Signature: My / Milli-Vercen
Law Enforcement Review and Approval
Approved by:
Date Approved:

PBSO Off-Duty Permits Office • Phone (561) 687-6817 or (561) 687-6818 or (561) 687-6823 • Email: PermitsDL@pbso.org PBSO #0550 Rev. 02/22

#### STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION

Section I, Item 5.

### TEMPORARY CLOSING OF STATE ROAD PERMIT

Date: Permit No				
Governmental Entity/Permittee				
Approving Local Government City of Pakolle Contact Person Nylene Clarke				
Address 207 Begonia Drive, Panokea, # 33476				
Telephone (561)924 5534 lxt. 2006 Email Citycles Cotyof Parokee. com				
Organization Requesting Special Event				
Name of Organization Paholee High School Contact Person Langu Mullins Verg				
Address 900 Lammone Rd Pahoker, 31, 33476				
Telephone 561.449.3524 Email Janay, Mullins & palmbrachschools, org				
Description of Special Event				
Event Title Homecoming Panade Date of Event 10/3/25				
Start Time Zom End Time 5 pm				
Event Route (attach map) Lanimore Rd, East Main St, South Lake Arenne				
Borack Obama Blod Randin Are Barack Obama Blod!				
Detour Route (attach map) Lanimore Rd., East Main Pl., Barack				
Obama Blod, South Lake dre, Kondin dre, Banach Obama				
Law Enforcement Agency Responsible for Traffic Control				
Name of Agency Palm Beach County Sheriffs Office				
US Coast Guard Approval for Controlling Movable Bridge				
Not Applicable				
Copy of USCG Approval Letter Attached				
Bridge Location				
The Permittee will assume all risk of and indemnify, defend and save harmless the State of Florida and the FDOT from and against any and all loss, damage, cost or expense arising in any manner on account of the exercise of this event.				
The Permittee shall be responsible to maintain the portion of the state road it occupies for the duration of this event, free of litter and providing a safe environment to the public.				
Signatures of Authorization				
Event Coordinator Janay Mullins Vercen Signature June 19/4/2025				
Name/Title Lientert Seth Perria Signature Ct Sze Date 09/04/2025				
Government Official Name/Title Date Date				
FDOT Special Conditions				
FDOT Authorization				
Name/Title Date				



RON DESANTIS GOVERNOR 3400 West Commercial Boulevard Fort Lauderdale, FL 33309 KEVIN J. THIBAULT SECRETARY

#### **EVENT PERMIT APPLICATION CHECKLIST**

EVENT NAME: Pahokee High Homecoming Parade

REQUESTED BY: Janay Mullins Vereen AGENCY: Pahokee High School

DATE OF EVENT: October 3, 2025 TIME OF EVENT: 2:00 PM - 5:00 PM

■ Please ensure FDOT (Florida Department of Transportation) receives the event permit request at least four (4) weeks prior to the event. Last minute requests might not be granted.

Map of event is legible
North Arrow shows on map
All consecutive plan sheets are provided, numbered, and have matchlines <sup>1</sup>
Road names are clearly shown on map
Variable Message Signs will be used
Variable Message Signs displays correct and current information
Channelizing devices will be used and are clearly shown on map
Map includes the location of the event (for fairs, art festivals, etc.)
Map includes a legend
All signs and VMS boards have a reference location of the installation <sup>2</sup>
The beginning and end of the route/event/race are clearly shown on the map
Originally Signed Copy of Permit Application (online now with OSP)
MOT Plan that conforms to the latest FDOT Standard Plans (old Design Standards)
Detour route and complete signing of the detour route (if applicable)

www.fdot.gov

	Location Photos / Location Map				
	District 4 Road Closure Event Notice				
	Provide FDOT Temporary Traffic Control Certificate number of person preparing the MOT plans				
	Show the posted or temporary speed limit signs				
	Show the number and location of LEO's (law enforcement officers)				
	mple – If a plan sheet has matchline 'X', then the consecutive sheet should have the same matchline 'X'. Note: 'X' can be number/letter/symbol as long as it is the same for two matchlines that match two consecutive sheets.				
The reference location for the installation of the VMS should be done either by pointing the arrow to the installation location or by referencing the distance from some reference point. Also, denote the orientation of the panel with the symbol. Show the details/message of the VMS boards. At the time of the event and prior to the event (if needed). For example – 3 days prior message will be different compared to the day of actual event					
Sta	te of Florida – Temporary Closing of State Roadway for Filming				
	For ALL Filming – Certificate of Liability Insurance				
	\$1,000,000 coverage				
	FDOT Listed as additional insured				
	For Filming on Structures – Certificate of Liability Insurance				
	\$5,000,000 coverage				
	☐ FDOT Listed as additional insured				

\*\*\*Please ensure information is complete, legible, and included with the application – Missing, illegible, and/or incorrect information might not get a permit warranted\*\*\*



# **District 4 Road Closure Event Notice**

Event Title:

Pahokee High Homecoming Parade

Recurring (Y/N):

No

Date of Event:

October 3, 2025

Start Time:

2:00 PM

End Time:

5:00 PM

City:

Pahokee, FL

County:

Palm Beach County

Event Route:

See Map

Detour Route:

See Map

#### **Proposed Road Closures**

#### October 3, 2025

#### 1:00 PM UNTIL 5: 00 PM

#### 1. 1:00PM

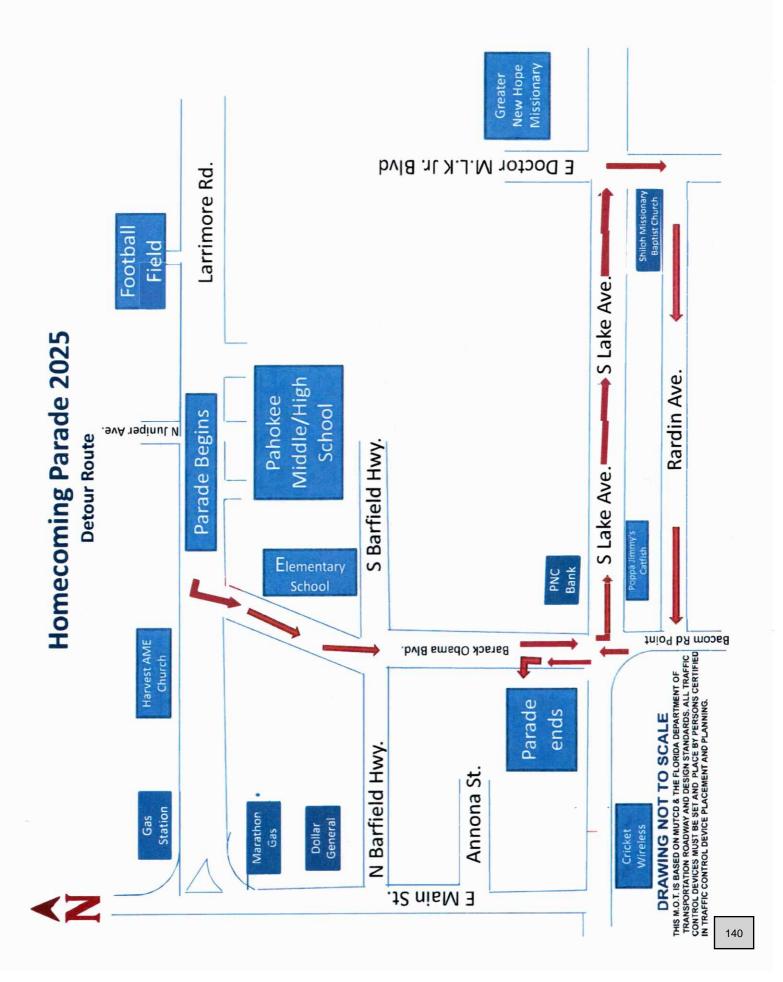
- A. Block Hwy 441 and Hwy 98 at Larrimore Road
- B. Block traffic at Larrimore Road and East Main Street. This should reopen when parade clears Larrimore Road onto East Main Street.
- C. E. Main Place should be blocked at Larrimore Road until parade clears Larrimore Road onto East Main Street.

NOTE: DEPUTY FOLLOWING PARADE WOULD CONTROL FLOW OF TRAFFIC AS PARADE MOVES THROUGH TOWN.

#### 2. 1:45+ or -

- a. Block traffic at N. Barfield Hwy. This Hwy could be reopened for right turns only when parade clears.
- b. N. Barfield could reopen for left turns after parade clears.
- 3. 2:00 PM + or
  - a. Close Intersection if South Lake and Bacom Point Road
  - b. Once parade clears intersection Bacom Point Road., East 1<sup>st</sup> Street and East Main Street. could be reopened while parade is on South Lake and returning on Rardin Ave.
- 4. 2:45 PM + or
  - a. Close South Lake at W 5<sup>TH</sup> Street until parade clears.
  - b. Close Rardin Ave. and W 5th Street at Rardin at Rardin Ave.
  - c. Reopen W 5<sup>th</sup> Street when parade clears W 5<sup>TH</sup> Street at Rardin at Rardin Ave.
- 5. 3:00 PM + or
  - a. Close Bacom Point Road at Rardin Ave. and Bacom Point Road/ South Lake intersection until parade clears intersection and proceeds down East 1<sup>st</sup> Street.
  - b. Parade will end at the PNC BANK.

## Missionary Vew Hope Greater E Doctor M.L.K Jr. Blvd Larrimore Rd. Footbal Field S Lake Ave. **Homecoming Parade 2025** Rardin Ave. Middle/High Pahokee School A Juniper Ave. Parade Begins S Lake Ave. Elementary School PNC Bank Bacom Rd Point Barack Obama Blvd. THIS M.O.T. IS BASED ON MUTCD & THE FLORIDA DEPARTMENT OF TRANSPORTATION ROADWAY AND DESIGN STANDARDS. ALL TRAFFIC CONTROL DEVICES MUST BE SET AND PLACE BY PERSONS CERTIFIED IN TRAFFIC CONTROL DEVICE PLACEMENT AND PLANNING. Parade ends DRAWING NOT TO SCALE N Barfield Hwy. Annona St. Station General Dollar Wireless E Main St.





#### AGENDA

#### **MEMORANDUM**

TO: Honorable Mayor & City Commissioners

VIA: Michael E. Jackson, City Manager

FROM: Office of the City Manager

SUBJECT: Inaugural Pahokee High School Alumni Picnic

DATE: September 18, 2025

#### **GENERAL SUMMARY/BACKGROUND:**

The City of Pahokee has been approached by the independent PHS Alumni Committee, a volunteer group that proposed the concept of an Alumni Picnic as a community-wide event. After discussions with the Committee, the City Commission expressed its intent to officially host the event for liability and coordination purposes.

The event will take place on Saturday, October 4, 2025, at Martin Luther King Jr. Park. By hosting the event, the City ensures that the activity is covered under the City's liability insurance and that security can be coordinated with the Palm Beach County Sheriff's Office (PBSO).

To offset costs associated with planning and execution, a uniform fee schedule has been set for alumni class participation and vendor registration, in which the PHS Alumni Committee and the City have reached consensus on.

The collected funds will be used to cover event operational costs and other logistical needs. If collected funds are insufficient, the City Commission's approval will allow the use of additional City funds for unforeseen or essential expenses, ensuring proper execution of the event.

#### **BUDGET IMPACT:**

Revenues from class registrations and vendor fees are expected to cover the majority of event expenses. However, the resolution authorizes the City Manager to allocate additional funds, if necessary, to cover operational or security costs not met by collected revenues.

#### **LEGAL NOTE:**

Defer to City Attorney.

#### **STAFF RECOMMENDATION:**

Staff recommends approval of the item.

#### **ATTACHMENTS:**

Resolution 2025-61

#### **RESOLUTION 2025-61**

A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, CONFIRMING THE CITY OF PAHOKEE'S HOSTING OF THE INAUGURAL PAHOKEE SCHOOL ALUMNI PICNIC; HIGH RATIFYING PARTICIPATION WITH THE PLANNING OF THE EVENT; APPROVING FEES FOR THE EVENT; AUTHORIZING USE OF COLLECTED **FUNDS** TO **OFF-SET EXPENSES**; **AUTHORIZING AN EXPENDITURE OF UP TO \$1,500.00 FOR** INCIDENTALS; AUTORIZING THE CITY MANAGER TO TAKE ALL NECESSARY STEP TO CARRY OUT THE EVENT INTENT; PROVIDING FOR SEVERABILITY; PROVIDING FOR ADOPTION OF REPRESENTATIONS; PROVIDING FOR AN EFFECTIVE DATE.

WHEREAS, the City of Pahokee ("City") will host the Inaugural Pahokee High School Alumni Picnic on Saturday, October 4, 2025, at Martin Luther King Jr. Park; and

**WHEREAS**, it is the intent of the City Commission that the City officially host the event and ratify any actions taken by the City Manager in support of the event; and

**WHEREAS**, as a host and sponsor of this event, the subject Alumni Picnic will be covered under the City's liability insurance; and

**WHEREAS**, the City Commission recognizes the public purpose in hosting this event and it is expected to be a positive gathering for the City of Pahokee and its residents; and

**WHEREAS**, the City Manager is requesting that the City Commission approve and ratify a fee of \$100.00 for class participation and \$100.00 for an Alumni Class Tent Registration Fee. Thus far, the City has collected a total of \$3,500 comprising of 31 class registrations and four tent registrations; and

WHEREAS, the fees collected are expected to cover most operational and incidentals but an amount of up to \$1,500.00 is requested for items that are unknown at the present time; and

**WHEREAS**, the independent PHS Alumni Committee, the volunteer group that proposed the event, agrees with the suggested fees; and

WHEREAS, the City will provide the necessary security for the event through the Palm Beach County Sheriff's Office (PBSO). Other operational and

logistical expenses will be covered primarily from fees collected from class registrations and vendor participation; and

**WHEREAS**, the City Commission finds that ratifying collected fees and confirming the City of Pahokee as a host and sponsor of the event is in the best interest of the City of Pahokee.

# NOW, THEREFORE, BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF PAHOKEE, FLORIDA, AS IT FOLLOWS:

<u>Section 1.</u> <u>Adoption of Representations.</u> The foregoing "Whereas" clauses are hereby ratified and confirm as being true, and the same are hereby made a specific part of this resolution.

<u>Section 2.</u> <u>Authorization and Ratification.</u> The City Commission of the City of Pahokee hereby authorizes serving as a host and sponsor of the Inaugural Pahokee High School Alumni Picnic and ratifies the acceptance of payment of funds collected by City.

<u>Section 3.</u> <u>Authorization of Incidentals</u>. The City Manager is hereby authorized to spend up to \$1,500.00 on incidentals not covered by the collection of fees. Any expenditure of funds shall be in accordance with the City's purchasing code; and

<u>Section 4.</u> <u>Approval of Fees</u>. The City Commission hereby ratifies and approves the following fees to be collected for the event: 1) Alumni Class Tent Registration Fee: \$100 per class; 2) Vendor Fee: \$100 per vendor.

<u>Section 5.</u> <u>Use of Funds and Intent.</u> All funds collected through class registrations and vendor fees are authorized to be used to fund operational and logistical expenses for the event, including but not limited to tents, tables, chairs, signage, marketing, sanitation, and other necessary costs. The City Manager is hereby authorized to carry out the intent of the event.

<u>Section 6.</u> Compliance. The City Manager shall ensure that all participants of the event execute a release holding the City harmless from liability.

<u>Section 7.</u> <u>Effective Date.</u> This Resolution shall be effective immediately upon its passage and adoption.

PASSED and ADOPTED this 23rd day of September 2025.

ATTEST	Keith W. Babb, Jr., Mayor	
Nylene Clarke, CMC, City Clerk		
APPROVED AS TO FORM AND	LEGAL SUFFICIEN	ICY:
Burnadette Norris-Weeks, P.A. City Attorney		
Moved by:		
Seconded by:		
VOTE:		
Mayor Babb	(Yes)	(No)
Vice Mayor Cowan-Williams	(Yes)	(No)
Commissioner McDonald	(Yes)	(No)
Commissioner McPherson	(Yes)	(No)
Commissioner Scott	(Yes)	(No)