

April 22, 2011

NOTICE OF RULE DEVELOPMENT

DEPARTMENT OF CORRECTIONS

RULE NO.: 33-203.601

RULE TITLE: Employee Benefit Trust Fund

PURPOSE AND EFFECT: The purpose and effect of the proposed rule is to amend Form DC2-354 to add a space to indicate whether an alcohol statement will be provided at the requested event and Form DC2-356 to provide a space to indicate the date and number of the check.

SUBJECT AREA TO BE ADDRESSED: Employee benefit trust fund

RULEMAKING AUTHORITY: 945.215, 945.21501 FS

LAW IMPLEMENTED: 945.215, 945.21501 FS

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA

ADMINISTRATIVE WEEKLY. THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Kendra Lee Jowers, 2601 Blair Stone Road, Tallahassee, Florida 32399-2500.

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

33-203.601 Employee Benefit Trust Fund.

(1) through (8) No change.

(9) Institutions requesting to withdraw money from the fund shall submit a request to the central office team describing the need for the funds and cost estimate for the project. The request will be submitted utilizing Form DC2-354, Employee Benefit Trust Fund Expenditure Request. Form DC2-354 is hereby incorporated by reference. Copies of this form are available from the Forms Control Administrator, ~~Bureau of Policy Development~~, 2601 Blair Stone Road, Tallahassee, Florida 32399-2500. The effective date of this form is _____ ~~April 13, 2008~~.

(10) The central office team shall review each request to ensure that the purpose of the expenditure is in accordance with authorized uses of the fund and to ensure that the institution has sufficient funds earmarked for the amount of the withdrawal. If the DC2-354 is approved, vendor payments may be requested by e-mail using ~~the~~ Form

DC2-356, EBTF Expenditure Check Request. Form DC2-356 is hereby incorporated by reference. Copies of this form are available from the Forms Control Administrator, ~~Bureau of Policy Development~~, 2601 Blair Stone Road, Tallahassee, Florida 32399-2500. The effective date of this form is _____ ~~April 13, 2008~~.

(11) A service charge equal to 7% of canteen revenues will be used to offset administrative costs of the employee benefit trust fund.

Rulemaking Specific Authority 945.215, 945.21501 FS. Law Implemented 945.215, 945.21501 FS. History—New 4-13-08, _____.