

MEMORANDUM

Agenda Item No. 11(A)(28)

TO: Honorable Chairman Bruno A. Barreiro
and Members, Board of County Commissioners

DATE: December 4, 2007

FROM: R. A. Cuevas, Jr.
County Attorney

SUBJECT: Resolution authorizing
in-kind services from
Miami-Dade Park and
Recreation Dept. for the
"La Griteria" and Holiday
Celebration

The accompanying resolution was prepared and placed on the agenda at the request of Commissioner Jose "Pepe" Diaz.



R. A. Cuevas, Jr.
County Attorney

RAC/bw

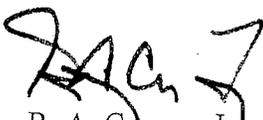


MEMORANDUM

(Revised)

TO: Honorable Chairman Bruno A. Barreiro
and Members, Board of County Commissioners

DATE: December 4, 2007

FROM: 
R. A. Cuevas, Jr.
County Attorney

SUBJECT: Agenda Item No. 11(A)(28)

Please note any items checked.

- "4-Day Rule" ("3-Day Rule" for committees) applicable if raised
- 6 weeks required between first reading and public hearing
- 4 weeks notification to municipal officials required prior to public hearing
- Decreases revenues or increases expenditures without balancing budget
- Budget required
- Statement of fiscal impact required
- Bid waiver requiring County Manager's written recommendation
- Ordinance creating a new board requires detailed County Manager's report for public hearing
- Housekeeping item (no policy decision required)
- No committee review

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 11(A)(28)
12-4-07

RESOLUTION NO. _____

RESOLUTION AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT FOR THE DECEMBER 8, 2007 "LA CRITERIA" AND HOLIDAY CELEBRATION SPONSORED BY THE COMMUNITY PERFORMING ARTS ASSOCIATION, INC. A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$2,166.00 TO BE FUNDED FROM THE DISTRICT 12 IN-KIND RESERVE FUND

WHEREAS, the Community Performing Arts Association, Inc. has requested in-kind services from the Miami-Dade Park Recreation Department for the December 8, 2007 "La Griteria" and Holiday Celebration in an amount not to exceed \$2,166.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, "La Griteria" and Holiday Celebration is a Nicaraguan traditional celebration with the purpose of conserving the native cultures of Nicaragua, educating and providing cultural awareness to the community of Nicaraguan culture; and

WHEREAS, the Community Performing Arts Association, Inc. is a not-for-profit organization; and

WHEREAS, "La Griteria" and Holiday Celebration is a district event, as defined in the attached Fee Waiver/In-kind Service Application and the in-kind services shall be funded from the District 12 In-kind Reserve Fund,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board authorizes in-kind services from the Miami-Dade Park and Recreation Department for the December 8, 2007

“La Griteria” and Holiday Celebration in an amount not to exceed \$2,166.00 to be funded from the District 12 In-kind Reserve Fund.

The foregoing resolution was sponsored by Commissioner Jose "Pepe" Diaz and offered by Commissioner _____, who moved its adoption. The motion was seconded by Commissioner _____ and upon being put to a vote, the vote was as follows:

- | | |
|----------------------|------------------------------------|
| | Bruno A. Barreiro, Chairman |
| | Barbara J. Jordan, Vice-Chairwoman |
| Jose "Pepe" Diaz | Audrey M. Edmonson |
| Carlos A. Gimenez | Sally A. Heyman |
| Joe A. Martinez | Dennis C. Moss |
| Dorrian D. Rolle | Natacha Seijas |
| Katy Sorenson | Rebeca Sosa |
| Sen. Javier D. Souto | |

The Chairperson thereupon declared the resolution duly passed and adopted this 4th day of December, 2007. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA
BY ITS BOARD OF
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: _____
Deputy Clerk

Approved by County Attorney as to form and legal sufficiency. NR

Monica Rizo

4

MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION

COUNTY FEE WAIVERS OR IN-KIND SERVICES REQUESTED THROUGH THIS PROCESS ARE NOT EFFECTIVE UNTIL APPROVED BY ACTION OF THE BOARD OF COUNTY COMMISSIONERS PURSUANT TO THE MIAMI-DADE COUNTY HOME RULE CHARTER

Please complete the following form and submit completed form along with requested materials, if applicable, to:

Dolores Green
Office of Strategic Business Management
111 N.W. 1st Street, Suite 2200
Miami, FL 33128

Phone: (305) 375-8143
Fax: (305) 375-5168

Type of Event/Application (select one of the following):

- District Event - Event of minimal impact related to specific commission district (Complete questions 1-7, sign and date; copy will be submitted to the appropriate District Commissioner within two days of receipt of application.)
 - Small Event - Event of minimal impact not necessarily related to a specific commission district. (Complete questions 1-7, sign and date.)
 - Special Event - Event with expected attendance of less than 5,000 with localized impact limited to an individual community or municipality (Complete questions 1-12, sign, date and submit form no later than 60 days prior to event date.)
 - Major Event - Large Event with expected attendance of over 5,000 or significant probability of protests, controversy, violence or vandalism (Complete questions 1-12, sign, date and submit form no later than 120 days prior to event date.)
- Note: Event budget must be included for "Special" and "Major" event types.

1. Full legal name of the requesting organization: Community Performing Arts Association Inc

2. Applicant Status: (Select one of the choices below)

- Not-For-Profit or Tax Exempt
- For-Profit
- Local Government or Public Entity
- Other (specify): _____

3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.): Victor Gutierrez
15250 S.w. 108 Avenue, Miami FL 33157 / (305) 256-5775 / 772-3536
Fax: (305) 259-1949 E-mail: comperarts@hotmail.com

4. Specify fee waiver or in-kind service requested (quantify, if applicable): in kind services \$2,000.00
fee waiver: Stage (Show mobil) with roof and lights

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): "La criteria & Holiday Celebration", Saturday December 8 2007, Nicaraguan traditional event & Holiday celebration. To conserve the nicaraguan traditions and other cultures living in Miami Dade County

5pm - 10pm
Setup Breakdown

6. Please select ALL that apply to event:

- Economic Development: Event supports vitality or growth of the local economy
- Youth/Education: Event benefits youth of any age and/or offers educational benefits
- Health and Social Services: Event supports health-related causes and/or social programs or institutions that improve quality of life within the community
- Arts and Culture: Event supports music, theatre, literature, art or culture
- Environmental: Event benefits environmental concerns or promotes conservation
- Sports and Athletics: Event supports/promotes organized sports or recreational participation

5

MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION

- 7. Physical address of event venues (please specify Commission District(s)): 103 Avenue West Flagler street,
City of Sweetwater
- 8. Description of regional or local impact: _____
- 9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): _____
- 10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): _____
- 11. Expected number of participants and estimated attendance (per day, if applicable): _____
- 12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): _____

I hereby certify that all the statements made in this application are true and correct.

Speticitelli
Signature of Authorized Representative

October 31, 2007
Date

State of Florida



Department of State

I certify the attached is a true and correct copy of the Articles of Incorporation of COMMUNITY PERFORMING ARTS ASSOCIATION, INC., a Florida corporation, filed on April 26, 2001, as shown by the records of this office.

I further certify the document was electronically received under FAX audit number H01000044556. This certificate is issued in accordance with section 15.16, Florida Statutes, and authenticated by the code noted below

The document number of this corporation is N01000002984.

Given under my hand and the Great Seal of the State of Florida, at Tallahassee, the Capital, this the Twenty-seventh day of April, 2001

Authentication Code: 101A00024945-042701-N01000002984-1/1



CR2EO22 (1-99)

Katherine Harris

Katherine Harris
Secretary of State



[Previous on List](#) [Next on List](#) [Return To List](#)

No Events No Name History

Detail by Entity Name

Florida Non Profit Corporation

COMMUNITY PERFORMING ARTS ASSOCIATION, INC.

Filing Information

Document Number N01000002984
FEI Number 651113174
Date Filed 04/26/2001
State FL
Status ACTIVE

Principal Address

15250 SW 108 AVENUE
MIAMI FL 33157 US

Changed 05/15/2003

Mailing Address

15250 SW 108 AVENUE
MIAMI FL 33157 US

Changed 05/15/2003

Registered Agent Name & Address

GUTIERREZ, HECTOR E
15250 SW 108 AVENUE
MIAMI FL 33157 US

Name Changed: 05/15/2003

Address Changed: 05/15/2003

Officer/Director Detail

Name & Address

Title PD

GUTIERREZ, HECTOR E
15250 SW 108 AVENUE
MIAMI FL 33157 US

Title TD

GUTIERREZ, ELI G
15250 SW 108 AVENUE
MIAMI FL 33157 US

Title SD

ESPINOZA, CONSUELO
15250 SW 108 AVENUE
MIAMI FL 33157 US

Annual Reports

Report Year Filed Date

2005	03/30/2005
2006	06/26/2006
2007	07/02/2007

Document Images

[07/02/2007 -- ANNUAL REPORT](#)
[06/26/2006 -- ANNUAL REPORT](#)
[03/30/2005 -- ANNUAL REPORT](#)
[07/01/2004 -- ANNUAL REPORT](#)
[05/15/2003 -- ANNUAL REPORT](#)
[06/16/2002 -- ANNUAL REPORT](#)
[04/26/2001 -- Domestic Non-Profit](#)

Note: This is not official record. See documents if question or conflict.

[Previous on List](#) [Next on List](#) [Return To List](#)

No Events **No Name History**

Entity Name Search

[Home](#) [Contact us](#) [Document Searches](#) [E-Filing Services](#) [Forms](#) [Help](#)
Copyright and Privacy Policies
Copyright © 2007 State of Florida, Department of State.

9

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **MAR 28 2006**

COMMUNITY PERFORMING ARTS
ASSOCIATION INC
15250 SW 108TH AVE
MIAMI, FL 33157-1316

Employer Identification Number:
65-1113174
DLN:
17053070781026
Contact Person:
GREGORY S PAJDA ID# 31533
Contact Telephone Number:
(877) 829-5500
Public Charity Status:
170(b)(1)(A)(vi)

Dear Applicant:

Our letter dated January 2002, stated you would be exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code, and you would be treated as a public charity, rather than as a private foundation, during an advance ruling period.

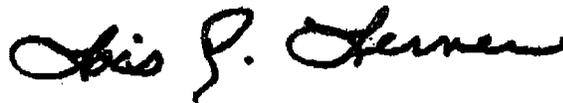
Based on the information you submitted, you are classified as a public charity under the Code section listed in the heading of this letter. Since your exempt status was not under consideration, you continue to be classified as an organization exempt from Federal income tax under section 501(c)(3) of the Code.

Publication 557, Tax-Exempt Status for Your Organization, provides detailed information about your rights and responsibilities as an exempt organization. You may request a copy by calling the toll-free number for forms, (800) 829-3676. Information is also available on our Internet Web Site at www.irs.gov.

If you have general questions about exempt organizations, please call our toll-free number shown in the heading.

Please keep this letter in your permanent records.

Sincerely yours,



Lois G. Lerner
Director, Exempt Organizations
Rulings and Agreements

Letter 1050 (DO/CG)

Form **W-9**
(Rev. November 2005)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the
requester. Do not
send to the IRS.

Print or type
See specific instructions on page 2.

Name (as shown on your income tax return)
Community Performing Arts Association Inc.

Business name, if different from above

Check appropriate box: Individual/ Sole proprietor Corporation Partnership Other Exempt from backup withholding

Address (number, street, and apt. or suite no.)
15250 S.W., 108 Avenue

City, state, and ZIP code
Miami, Florida 33157

List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

--	--	--	--	--	--	--	--	--	--

OR

Employer identification number

6	5	1	1	1	3	1	7	4
---	---	---	---	---	---	---	---	---

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out Item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, Item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person *M. J. Pele* Date **10-31-2007**

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

Memorandum



Date: December 4, 2007

To: Honorable Chairman Bruno A. Barreiro
and Members, Board of County Commissioners

From: George M. Burgess
County Manager 

Subject: District Specific In-Kind Request Recommendation

The Office of Strategic Business Management (OSBM) has reviewed the attached in-kind request and recommends for the item to move forward to the Board of County Commissioners for consideration. The district specific in-kind reserve balance allows for the funding of this request.

Background

A waiver for in-kind services has been requested by a not-for-profit organization the Community Performing Arts Association, Inc. for the "La Griteria and Holiday Celebration" held on December 8, 2007.

In-kind services have been requested in an amount not to exceed \$2,166 from the Miami-Dade Park and Recreation Department for use of a large showmobile. This event will be funded from the District 12 in-kind reserve fund.

In FY 2007-08, the Community Performing Arts Association, Inc. has received no County funding for this event.

Inkind1608