

## MEMORANDUM

Agenda Item No. 11(A)(11)

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

**DATE:** February 5, 2008

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

**SUBJECT:** Resolution retroactively  
authorizing in-kind services  
from Parks for the Praise in  
the Park Festival &  
Community Health Fair

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The accompanying resolution was prepared and placed on the agenda at the request of Commissioner Dennis C. Moss.

  
\_\_\_\_\_  
R. A. Cuevas, Jr.  
County Attorney

RAC/bw

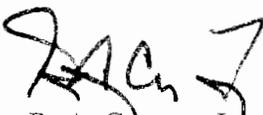


# MEMORANDUM

(Revised)

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

DATE: February 5, 2008

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

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

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

Agenda Item No. 11(A)(11)

Veto \_\_\_\_\_

2-5-08

Override \_\_\_\_\_

RESOLUTION NO. \_\_\_\_\_

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT FOR THE NOVEMBER 17, 2007 PRAISE IN THE PARK FESTIVAL & COMMUNITY HEALTH FAIR SPONSORED BY WOMEN WITH A PURPOSE, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$916.00 TO BE FUNDED FROM THE DISTRICT 9 IN-KIND RESERVE FUND

**WHEREAS**, Women With A Purpose, Inc. has requested in-kind services from the Miami-Dade Park and Recreation Department for the November 17, 2007 Praise in the Park Festival & Community Health Fair in an amount not to exceed \$916.00 (see attached Fee Waiver/In-kind Service Application); and

**WHEREAS**, the purpose of the Praise in the Park Festival & Community Health Fair is to provide carnival games for kids, free health screenings services, and health education; and

**WHEREAS**, Women With A Purpose, Inc. is a not-for-profit organization; and

**WHEREAS**, the Praise in the Park Festival & Community Health Fair is a small event, as that term is defined on the attached Fee Waiver/In-kind Service Application, and the in-kind services shall be funded from the District 9 In-kind Reserve Fund,

**NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA**, that this Board retroactively authorizes in-kind services from the Miami-Dade Park and Recreation Department for the November 17, 2007 Praise in the Park Festival & Community Health Fair in an amount not to exceed \$916.00 to be funded from the District 9 In-kind Reserve Fund.

The foregoing resolution was sponsored by Commissioner Dennis C. Moss 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
Dorin D. Rolle	Natacha Seijas
Katy Sorenson	Rebeca Sosa
Sen. Javier D. Souto	

The Chairperson thereupon declared the resolution duly passed and adopted this 5<sup>th</sup> day of February, 2008. 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.

          
JK

Monica Rizo

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:

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

Phone: (305) 375-5143  
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: WOMEN WITH A PURPOSE, 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.):  
SHUNDA BROWN P O BOX 970-913 MIAMI FL 33197  
786-348-5723 801-841-5223 (FAX) WWA@INC@YAHOO.COM

4. Specify fee waiver or in-kind service requested (quantify, if applicable):  
PERKITS  
SHIRT

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries):  
PRaise IN the PARK FESTIVAL & Community Health Fair  
SATURDAY, Nov. 17, 2007  
To provide good old fashion community spirit by offering  
cycling, outdoor riding, food, games & live entertainment. Also a  
Full Health Fair

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

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

- 7. Physical address of event venues (please specify Commission District(s)):  
GOULDA PARK 11350 SW 214 STREET
- 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.

Shunda T. Brown  
Signature of Authorized Representative

11/15/07  
Date

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# State of Florida



Department of State

I certify from the records of this office that WOMEN WITH A PURPOSE, INC. is a corporation organized under the laws of the State of Florida, filed on May 10, 2001.

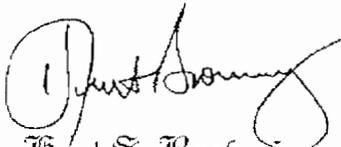
The document number of this corporation is N01000003300.

I further certify that said corporation has paid all fees due this office through December 31, 2007, that its most recent annual report/uniform business report was filed on September 4, 2007, and its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capitol, this the  
Fifth day of September, 2007



  
Kurt S. Browning  
Secretary of State

# **Praise in the Park Festival & Community Health Fair**

Sponsored by: *Women With A Purpose, Inc.*

**DATE:** Saturday, November 17, 2007

**TIME:** 10:00am – 2:00pm

**PLACE:** Goulds Park  
11350 SW 216 Street  
Miami, FL 33170



**PLEASE JOIN US FOR A DAY  
OF CARNIVAL GAMES FOR  
THE KIDS, LIVE GOSPEL  
ENTERTAINMENT, HEALTH  
SCREENINGS, DELICIOUS  
FOOD ITEMS, AND PRIZES FOR  
THE ENTIRE FAMILY.**



Received today @ 10:50 AM  
11/14/07

ord fax

MIAMI-DADE PARKS & RECREATION DEPARTMENT  
SHOWMOBILE, STAGES, BLEACHERS, BOUTH & PRODUCTION  
305-257-0913 EXT: 240/305-257-1083 (P)

EQUIPMENT CONFIRMATION FORM

ORGANIZATION/AGENCY: OFFICE OF COMMISSIONER DENNIS C. MOSS, VICE-CHAIRMAN  
not available

EQUIPMENT REQUESTED: Large Showmobiles w/ Stages & Bleachers

NAME OF PERSON RESPONSIBLE FOR THIS BILL: DENNIS C. MOSS

BILLING ADDRESS/ ZIP CODE: 111 N.W. 1<sup>st</sup> STREET, SUITE 225, MIAMI, FLORIDA 33137

NAME/TITLE OF THE EVENT: Presea (orlando) Festival and Fair

ADDRESS OF EVENT: 11305 S.W. 21<sup>st</sup> Avenue, South Field, SOULOS PARK

TODAY'S DATE: DATE (S) OF EVENT: November 17, 2007

SET-UP TIME & DAY: 8 AM - 10 AM

TAKE-DOWN DAY: 4:00 PM - 7:00 PM

CONTACT PERSON/PHONE: Sylvia Pines, 305-348-5222

AT SITE CONTACT/CELL PHONE #:

SPECIAL INSTRUCTIONS: Direction item(s) are to be placed, maps, diagrams, etc.  
Please contact organization for special instructions.

OTHER INFORMATION: include additional equipment if needed.  
Please see attached request letter

We, the users, understand that we assume full responsibility for any damage, theft or loss to said equipment and its accessories between the time the Miami-Dade Parks and Recreation Department completes setting up and the time it taken down. We, the users, also agree to adhere to the requests set forth in the rental policy. We do have a copy of the rental policy and I understand the requirements set forth in renting the equipment recalled as outlined in the rental policy. We also understand that the total fee is to be remitted 15, five working days before the event.

\*Fee \$ 916.00  
Signatures: Sylvia Pines  
(SEE FEE SCHEDULE FOR EXACT CHARGES) Agency/Group

CANCELLATIONS MUST BE MADE THROUGH IN ADVANCE OF THE EVENT BY FAX OR EMAIL OTHERWISE EXPECT TO BE CHARGED 1/2 (HALF) OF RENTAL FEE.

\*There will be no completed reservation on the website unless the confirmation form is filled out completely and signed.

In-Kind  Budget Allocation

DATE 11/14/07  
SYLVIA PINES

FAXED 11/14/07

NO. ITEMS AVAILABLE EXCEPT BLEACHER



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[Events](#)   [No Name History](#)

## Detail by Entity Name

### Florida Non Profit Corporation

WOMEN WITH A PURPOSE, INC.

### Filing Information

**Document Number** N01000003300  
**FEI Number** 020545392  
**Date Filed** 05/10/2001  
**State** FL  
**Status** ACTIVE  
**Last Event** CANCEL ADM DISS/REV  
**Event Date Filed** 11/24/2003  
**Event Effective Date** NONE

### Principal Address

16803 SW 107 PLACE  
MIAMI FL 33157

Changed 09/04/2007

### Mailing Address

P O BOX 970413  
MIAMI FL 33197

Changed 08/15/2006

### Registered Agent Name & Address

BROWN, SHUNDA T  
16803 SW 107 PLACE  
MIAMI FL 33157 US

Address Changed: 08/15/2006

### Officer/Director Detail

#### Name & Address

Title PD

BROWN, SHUNDA T  
16803 SW 107 PLACE  
MIAMI FL 33157

Title VP

DARLING, KELVINA  
9400 SW 222 LANE

10

MIAMI FL 33189

Title SD

SMITH, MARJORIE  
10021 MARTINIQUE DR  
MIAMI FL 33189

## Annual Reports

### Report Year Filed Date

2005	06/03/2005
2006	08/15/2006
2007	09/04/2007

## Document Images

09/04/2007 -- ANNUAL REPORT	<a href="#">View image in PDF format</a>
08/15/2006 -- ANNUAL REPORT	<a href="#">View image in PDF format</a>
06/03/2005 -- ANNUAL REPORT	<a href="#">View image in PDF format</a>
09/08/2004 -- ANNUAL REPORT	<a href="#">View image in PDF format</a>
11/24/2003 -- REINSTATEMENT	<a href="#">View image in PDF format</a>
10/25/2002 -- Amendment	<a href="#">View image in PDF format</a>
09/13/2002 -- ANNUAL REPORT	<a href="#">View image in PDF format</a>
05/10/2001 -- Domestic Non-Profit	<a href="#">View image in PDF format</a>

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

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# Memorandum



**Date:** February 5, 2008

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

**From:** George M. Burgess  
County Manager 

**Subject:** District Specific In-Kind Reserve Request Recommendation

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## 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 retroactive fee waiver for in-kind services is being requested by a not-for-profit organization Women With A Purpose, Inc. for the Praise in the Park Festival & Community Health Fair event scheduled for November 17, 2007.

In-kind services have been requested in an amount not to exceed \$916 from the Miami-Dade Park and Recreation Department for a set of bleachers. This event will be funded from the District 9 in-kind reserve fund.

In FY 2007-08, Women With a Purpose, Inc. has received \$2,000 from District 9 discretionary reserve.

Inkind3008