

MEMORANDUM

Agenda Item No. 11(A)(25)

TO: Honorable Chairman Dennis C. Moss
and Members, Board of County Commissioners

DATE: April 7, 2009

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

SUBJECT: Resolution retroactively
authorizing in-kind services
for the February 27, 2009
“Carnaval Miami 8K Run”

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Commissioner Sally A. Heyman.



R. A. Cuevas, Jr.
County Attorney


RAC/up



MEMORANDUM
(Revised)

TO: Honorable Chairman Dennis C. Moss
and Members, Board of County Commissioners

DATE: April 7, 2009

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County Attorney

SUBJECT: Agenda Item No. 11(A)(25)

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 Mayor'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)(25)
4-7-09

RESOLUTION NO. _____

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT FOR THE FEBRUARY 27, 2009 "CARNAVAL MIAMI 8K RUN" SPONSORED BY THE KIWANIS CLUB OF LITTLE HAVANA, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$1,225.00 TO BE FUNDED FROM THE COUNTYWIDE IN-KIND RESERVE FUND

WHEREAS, the Kiwanis Club of Little Havana, Inc. has requested in-kind services from the Miami-Dade Park and Recreation Department for the February 27, 2009 "Carnaval Miami 8K Run" in an amount not to exceed \$1,225.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the purpose of the "Carnaval Miami 8K Run" is to, among other things, raise funds for worthy projects and programs including the Children's Cancer Clinic; and

WHEREAS, the Kiwanis Club of Little Havana, Inc. is a not-for-profit organization; and

WHEREAS, the "Carnaval Miami 8K Run" is a special event, as that term is defined on the attached Fee Waiver/In-kind Service Application, and the fee waiver shall be funded from the Countywide 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 a fee waiver from the Miami-Dade Park and Recreation Department for the February 27, 2009 "Carnaval Miami 8K Run" in an amount not to exceed \$1,225.00 to be funded from the Countywide In-kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Sally A. Heyman. It was 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:

Dennis C. Moss, Chairman
Jose "Pepe" Diaz, Vice-Chairman

Bruno A. Barreiro	Audrey M. Edmonson
Carlos A. Gimenez	Sally A. Heyman
Joe A. Martinez	Barbara J. Jordan
Dorin D. Rolle	Natacha Seijas
Katy Sorenson	Rebeca Sosa
Sen. Javier D. Souto	

The Chairperson thereupon declared the resolution duly passed and adopted this 7th day of April, 2009. 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.

GKS

Gerald K. Sanchez

2127
Parks, 205

MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION
FY 2008-09

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:

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.

Commissioner sponsoring event Commissioner Sally Heyman

1. Full legal name of the requesting organization: Kiwanis Club of Little Havana

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.):

Sylvia Vieta - Kiwanis Club of Little Havana
1400 S.W. First Street, Miami, FL 33135
T. 305-644-8888 F. 305-644-8693 SVIETA@CARNIVALMIAMI.COM

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

Requesting FEE WAIVER for Showmobile Stage

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FEE WAIVER/IN-KIND SERVICES APPLICATION
Page 2

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries):

CARNIVAL MIAMI 8K RUN - FRIDAY, FEBRUARY 27, 2009

AN 8 KILOMETER & 5K WALK THROUGH CALLE OCHO IN
LITTLE HAVANA TO BENEFIT THE COMMUNITY PROJECTS
& PROGRAMS OF THE KIWANIS CLUB OF LITTLE HAVANA
AND CHILDREN'S CANCER CLINIC

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

7. Physical address of event venues (please specify Commission District(s)):

Southwest 8 Street at intersection with
PARKER AVENUE - DISTRICT 3

8. Description of regional or local impact:

CALLE OCHO 8K RUN ATTRACTS RUNNERS OF ALL AGES.
IT BEGINS WITH A KIDDIE SWIM, CONTINUES WITH A
HIGH SCHOOL CHALLENGE & CULMINATES WITH THE 8K RUN.
CHILDREN & STUDENTS PARTICIPATE FREE

9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable):

EVENT SET-UP IS FRIDAY, FEB 27 AT 2:00 P.M.
AND BREAKDOWN AT 10:00 P.M.

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FEE WAIVER/IN-KIND SERVICES APPLICATION
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10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable):

Race Course Starts on S St. & S.E. 1 Avenue
To 22 Avenue finishing BACK on S.E. 1 Avenue

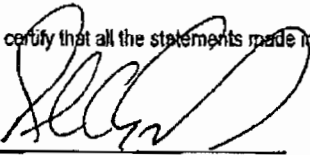
11. Expected number of participants and estimated attendance (per day, if applicable):

APP. 1,500 Runners

12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed):

Herewith enclosed

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



Signature of Authorized Representative

1/14/08

Date

CARNIVAL MIAMI 8K RUN						
BUDGET						
2009						
REVENUES						
Title Sponsorship:					\$33,000	
Other Sponsors/Revenue:					6,000	
Entry Fees					15,000	
Bad Debt Recovery (Truth 00')						
TOTAL REVENUES					\$54,000	
EXPENSES						
8K Promotion					\$1,925	
8K Run Prizes					4,500	
T-Shirts					2,000	
Race Management Fee					5,000	
Credit Card Fees					350	
Police					10,000	
Fire & Rescue					1,500	
Clean Up					950	
Barricades/Labor					5,000	
Portable Toilets					450	
Entertainment					1,000	
Temp Pole/Electricity					1,000	
Rentals (Trucks, Tables, Etc.)					1,450	
Banners/Signs					2,500	
Printing					3,000	
Food/Refreshments/Ice					5,975	
Race #, Packs, Pins, Bags					1,000	
Mailouts/Postage					1,800	
Insurance					750	
Photography					350	
Timing					2,000	
PA System					250	
Race Day Workers					750	
Miscellaneous					500	
TOTAL EXPENSES					54,000	
NET PROFIT (Loss)					\$0	

JAN. 20. 2009 9:45AM

NO. 510 P. 6

Department of the Treasury
Internal Revenue Service
Quality Review Staff
Taxpayer Assistance Group
P. O. Box 1055 - RM 907
Atlanta, Georgia 30370-0000

RECEIVED JUL 31 1989

Date: JUL 26 1989

Your Letter Dated:
06/02/89

Refer Reply to:
QRS:EO:TPA

EIN:
51-0169294

KIWANIS CLUB OF LITTLE HAVANA, INC.
% LESLIE V. PANTIN
970 SW FIRST ST 408
MIAMI, FL 33130-1112

Parent Organization: KIWANIS INTERNATIONAL NATIONAL
HEADQUARTERS

Dear Taxpayer:

This is in response to your request for confirmation of your exemption from Federal Income Tax.

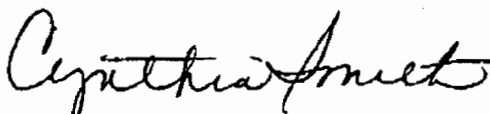
Your organization was recognized as exempt from Federal Income Tax under section 501(C)(4) of the Internal Revenue Code July, 1940

Your organization is a subordinate unit of the parent organization identified above, which is covered under group exemption number 0026.

Please let us know of any change in your purpose, character, or method of operation so we may consider the effect of the change on your exempt status. Also, you should inform us of any change in your name or address. If you have any questions, please write to the address shown above.

Thank you for your cooperation.

sincerely yours,



Exempt Organizations Coordinator



SHOWMOBILES, STAGES, BLEACHERS, AND SOUND PRODUCTION ^{8K} (305) 226-8315 Ext. 224/(305) 553-8511 (Fax)

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: Kiwanis Club of Little Havana

EQUIPMENT REQUESTED: Showmobile Stage

NAME OF PERSON RESPONSIBLE FOR THIS RENTAL: _____

OR INDEX CODE (MIAMI-DADE COUNTY AGENCIES ONLY): CCent 010496

BILLING ADDRESS/ ZIP CODE: 1400 S.W. First Street
Miami, FL 33135

NAME/TITLE OF THE EVENT: CARNIVAL Miami 8K Run

ADDRESS OF EVENT: Brickell Avenue @ S.W. 8 Street

TODAY'S DATE: Jan. 14, 2009 DATE (S) & TIME OF EVENT: Friday 2/27

SET-UP TIME & DAY: Fr: 2/27 @ 2:00 PM

TAKE-DOWN & DAY: Fr: 2/27 @ 10:00 PM

CONTACT PERSON/PHONE: Peter Iserra - 305-219-1106

AT SITE CONTACT/CELL PHONE #: Josef Beito - 786-289-6843

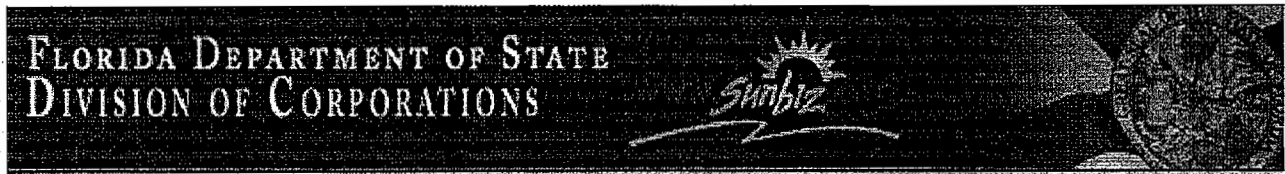
SPECIAL INSTRUCTIONS: Direction item(s) are to be placed, maps, diagrams, etc.

OTHER INFORMATION: Include additional equipment if needed.

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 Park and Recreation Department completes setting up and the time it takes 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 fully understand the requirements set forth in renting the equipment requested as out-lined in the rental policy. We also understand that the total fee is to be remitted (15) fifteen working days before the event.

*Fee _____ Signature [Signature]
*(SEE FEE SCHEDULE FOR EXACT CHARGES)
Agency/Group _____

CANCELLATIONS MUST BE MADE 72 HOURS 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 schedule unless the confirmation form is filled out completely and signed.



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Entity Name S

Detail by Entity Name

Florida Non Profit Corporation

KIWANIS CLUB OF LITTLE HAVANA, INC.

Filing Information

Document Number 737783
FEI Number 510169294
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Principal Address

1400 SW FIRST STREET
MIAMI FL 33135

Changed 05/01/2007

Mailing Address

1400 SW FIRST STREET
MIAMI FL 33135

Changed 05/01/2007

Registered Agent Name & Address

PATIN, LESLIE JR.
 1400 SW FIRST STREET
 MIAMI FL 33135 US

Address Changed: 05/01/2007

Officer/Director Detail

Name & Address

Title P

GONZALEZ, RICARDO C
 8852 SW 59 STREET
 MIAMI FL 33173

Title S

THOMAS, FALCON E

11

717 TIZIANO AVENUE
CORAL GABLES FL 33143

Title VP

COSIO, ARMANDO
7435 SW 86 COURT
MIAMI FL 33143

Title T

LEBENA, JESUS
16852 NW 88TH PATH
MIAMI LAKES FL 33018

Title VVP

GARCIA, CARLOS
6545 SW 72 CT.
MIAMI FL 33143

Title AT

POMBO, GERRY
15740 SW 99 TERRACE
MIAMI FL 33196

Annual Reports

Report Year Filed Date

2006	04/22/2006
2007	05/01/2007
2008	01/23/2008

Document Images

- 01/23/2008 -- ANNUAL REPORT
- 05/01/2007 -- ANNUAL REPORT
- 04/22/2006 -- ANNUAL REPORT
- 01/31/2005 -- ANNUAL REPORT
- 05/03/2004 -- ANNUAL REPORT
- 05/05/2003 -- ANNUAL REPORT
- 04/02/2002 -- ANNUAL REPORT
- 10/01/2001 -- ANNUAL REPORT
- 01/26/2001 -- ANNUAL REPORT
- 04/19/2000 -- ANNUAL REPORT
- 03/02/1999 -- ANNUAL REPORT
- 01/29/1998 -- ANNUAL REPORT
- 01/28/1997 -- ANNUAL REPORT
- 03/21/1996 -- ANNUAL REPORT

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Rodriguez, Nadia (OSBM)

From: Byrnes, Timothy (MDPR)
Sent: Monday, February 02, 2009 3:44 PM
To: Rodriguez, Nadia (OSBM)
Cc: Gonzalez, Ana (MDPR); Morgan, Tom (MDPR)
Subject: RE: in-kind

Nadia, per your request see our responses below,
Tim

Tim Byrnes, Tropical Park/Trail Glades Range/Showmobile Service Area Manager
Miami-Dade County Park and Recreation Department
Tropical Park 7900 SW 40th Street, Miami, FL 33155
305-226-8315 Phone, 305-553-8511 Fax
www.miamidade.gov/parks
"Delivering Excellence Every Day"

From: Rodriguez, Nadia (OSBM)
Sent: Monday, February 02, 2009 2:02 PM
To: Byrnes, Timothy (MDPR)
Subject: in-kind

Good afternoon,

Please provide me with the cost estimates for the following events:

Kiwanis Club Carnival and 8K Run_ 2/27 medium showmobile \$1,225.00

Church in Dade County_4/6-7 This group has not made contact with us as of today 02/02/09

Creative Children Therapy_2/28 If this is the event at Kendall Indian Hammocks Park the cost is \$3,390.00

City of N Miami Beach Comm. Festival_3/1 large showmobile \$2,566.00


Nadia L. Rodriguez
Office of Strategic Business Management
111 NW 1 St, 22nd Floor
Miami, FL 33128
Tel: (305) 375-4183

Memorandum



Date: April 7, 2009

To: Honorable Chairman, Dennis C. Moss
and Members, Board of County Commissioners

From: George M. Burgess
County Manager 

Subject: Countywide In-Kind Reserve Request Recommendation

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 countywide in-kind reserve balance allows for the funding of this request.

Background

A retroactive waiver for in-kind services has been requested by a not-for-profit organization the Kiwanis Club of Little Havana, Inc. for their "Carnaval Miami 8K Run" held on February 27, 2009.

In-kind services have been requested in an amount not to exceed \$1,225 from the Miami-Dade Park and Recreation Department for the use of a medium show mobile. This event will be funded from the countywide in-kind reserve fund.

In FY 2008-09, the Kiwanis Club of Little Havana, Inc. has received \$500 from District 11 office funds and \$1,375 from District 12 discretionary reserve. In addition, the organization has requested a cash allocation from the in-kind reserve of \$50,000 pending Board of County Commissioner approval at the March 3, 2009 meeting.

Inkind06309