

MEMORANDUM

Agenda Item No. 11(A) (22)

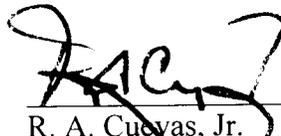
TO: Honorable Chairman Dennis C. Moss
and Members, Board of County Commissioners

DATE: December 7, 2010

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

SUBJECT: Resolution retroactively authorizing
in-kind services for the November 13,
2010 "Let's Move Together
Walkathon" event

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



R. A. Cuevas, Jr.
County Attorney

RAC/cp



MEMORANDUM

(Revised)

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

DATE: December 7, 2010

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

SUBJECT: Agenda Item No. 11(A)(22)

Please note any items checked.

- "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
- Ordinance creating a new board requires detailed County Manager's report for public hearing
- No committee review
- Applicable legislation requires more than a majority vote (i.e., 2/3's ____, 3/5's ____, unanimous____) to approve
- Current information regarding funding source, index code and available balance, and available capacity (if debt is contemplated) required

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 11(A)(22)
12-7-10

RESOLUTION NO. _____

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT FOR THE NOVEMBER 13, 2010 "LET'S MOVE TOGETHER WALKATHON" SPONSORED BY ARTHRITIS FOUNDATION, FLORIDA CHAPTER, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$1,232.00 TO BE FUNDED FROM THE UNSPENT BALANCE OF THE DISTRICT 7 IN-KIND RESERVE FUND

WHEREAS, Arthritis Foundation, Florida Chapter, Inc. has requested in-kind services from the Miami-Dade Park and Recreation Department for the November 10, 2010 "Let's Move Together Walkathon" in an amount not to exceed \$1,232.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the purpose of the "Let's Move Together Walkathon" is to raise funds to, among other things, support more than 500,000 children and adults in Miami-Dade County living with arthritis; and

WHEREAS, the Arthritis Foundation, Florida Chapter, Inc. is a not-for-profit organization; and

WHEREAS, the "Let's Move Together Walkathon" is a small event, as that term is defined on the attached Fee Waiver/In-kind Service Application, and \$1,232.00 of the in-kind services shall be funded from the unspent balance of the District 7 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 10, 2010 "Let's Move Together Walkathon" in an amount not to exceed \$1,232.00 to be funded from the unspent balance of the District 7 In-kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Carlos A. Gimenez. 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 | Lynda Bell |
| Audrey M. Edmonson | Carlos A. Gimenez |
| Sally A. Heyman | Barbara J. Jordan |
| Joe A. Martinez | Jean Monestime |
| Natacha Seijas | Rebeca Sosa |
| Sen. Javier D. Souto | |

The Chairperson thereupon declared the resolution duly passed and adopted this 7th day of December, 2010. 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

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

Perkins 1032

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 CARLOS GIMENEZ

1. Full legal name of the requesting organization: ARTHRITIS FOUNDATION, FLORIDA CHAPTER, 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.):

INGRID VELARDE, COMMUNITY DEVELOPMENT DIRECTOR
5101 NW 21ST AVE., STE. 440, FORT LAUDERDALE, FL 33309
PHONE: 305-873-6323, FAX: 954-666-1232
IVELARDE@ARTHRITIS.ORG

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

\$500⁰⁰ PARK RESERVATION FEE
\$750⁰⁰ PARKING FEES (150 CARS)

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): THE 2010
"LET'S MOVE TOGETHER" MIAMI-DADE ARTHRITIS WALK TAKES PLACE
NOV. 13, 2010 AND RAISES MONEY TO SUPPORT THE MORE THAN
500,000 CHILDREN AND ADULTS IN MIAMI-DADE COUNTY LIVING
WITH ARTHRITIS. FUNDS RAISED GO TOWARDS SUMMER CAMP FOR
CHILDREN WITH JUVENILE ARTHRITIS, PUBLIC AWARENESS, RESEARCH
AND EDUCATION TO IMPROVE THE LIVES OF PEOPLE WITH ARTHRITIS.

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)): DISTRICT 7, CRANDON
PARK, 4000 CRANDON BLVD., KEY BISCAYNE

8. Description of regional or local impact: _____

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

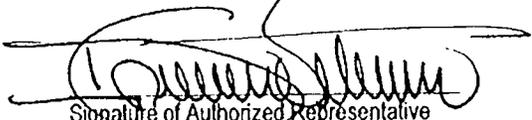
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10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): _____

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

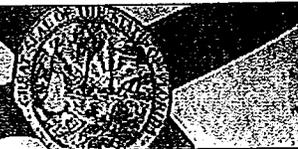
12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): _____

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


Signature of Authorized Representative

9/2/2010
Date

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Entity Name Search

[Events](#)

[Name History](#)

Detail by Entity Name

Florida Non Profit Corporation

ARTHRITIS FOUNDATION, FLORIDA CHAPTER, INC.

Filing Information

Document Number 702175
FEI/EIN Number 590816892
Date Filed 03/20/1961
State FL
Status ACTIVE
Last Event RESTATED ARTICLES
Event Date Filed 06/02/1992
Event Effective Date NONE

Principal Address

408 12TH STREET WEST
BRADENTON FL 34205

Changed 01/15/2009

Mailing Address

408 12TH STREET WEST
BRADENTON FL 34205

Changed 01/15/2009

Registered Agent Name & Address

FORREST, ANNE
408 12TH ST. W.
BRADENTON FL 34205 US

Name Changed: 02/24/2003

Address Changed: 01/10/2006

Officer/Director Detail

Name & Address

Title OFF

FORREST, ANNE
408 12TH STREET WEST
BRADENTON FL 34205

Title CH

OLDEN, DENNIS
610 WEST SWANN AVENUE
TAMPA FL 33606

Memorandum



Date: December 7, 2010

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

From: George M. Burgess
County Manager

A handwritten signature in black ink, appearing to read "G. Burgess".

Subject: District Specific In-Kind Reserve Request Recommendation

Recommendation

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

Background

A retroactive waiver for in-kind services has been requested by a not-for-profit organization, Arthritis Foundation, Florida Chapter, Inc., for their "Let's Move Together Walkathon" event held on November 13, 2010.

In-kind services have been requested in an amount not to exceed \$1,232 from the Miami-Dade Park and Recreation Department for the parking fee waiver at Crandon Park. This event will be funded from the unspent balance of the District 7 in-kind reserve fund.

In FY 2010-11, Arthritis Foundation, Florida Chapter, Inc., received no funding for this event.

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