

MEMORANDUM

Agenda Item No. 11(A) (14)

TO: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

DATE: June 7, 2011

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

SUBJECT: Resolution retroactively authorizing
in-kind services for the April 29, 2011
"Relay for Life" event

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



R. A. Cuevas, Jr.
County Attorney

RAC/cp



MEMORANDUM

(Revised)

TO: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

DATE: June 7, 2011

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

SUBJECT: Agenda Item No. 11(A)(14)

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)(14)
6-7-11

RESOLUTION NO. _____

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT FOR THE APRIL 29, 2011 "RELAY FOR LIFE" SPONSORED BY AMERICAN CANCER SOCIETY, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$2,500.00 TO BE FUNDED FROM THE UNSPENT BALANCE OF THE DISTRICT 1 FY 2008-09 IN-KIND RESERVE FUND

WHEREAS, the American Cancer Society, Inc. has requested in-kind services from the Miami-Dade Park and Recreation Department for the April 29, 2011 "Relay for Life" in an amount not to exceed \$2,500.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the "Relay for Life" is a fundraiser to benefit the American Cancer Society and aims to raise community awareness regarding the fight against cancer; and

WHEREAS, the American Cancer Society, Inc. is a not-for-profit organization; and

WHEREAS, the "Relay for Life" is a small event, as that term is defined on the attached Fee Waiver/In-kind Service Application, and \$2,500.00 of the in-kind services shall be funded from the unspent balance of the District 1 FY 2008-09 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 April 29, 2011 "Relay for Life" in an amount not to exceed \$2,500.00 to be funded from the unspent balance of the District 1 FY 2008-09 In-kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Barbara J. Jordan. 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:

- | | |
|-------------------------------------|----------------------|
| Joe A. Martinez, Chairman | |
| Audrey M. Edmonson, Vice Chairwoman | |
| Bruno A. Barreiro | Lynda Bell |
| Esteban L. Bovo, Jr. | Jose "Pepe" Diaz |
| Sally A. Heyman | Barbara J. Jordan |
| Jean Monestime | Dennis C. Moss |
| Rebeca Sosa | Sen. Javier D. Souto |
| Xavier L. Suarez | |

The Chairperson thereupon declared the resolution duly passed and adopted this 7th day of June, 2011. 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

Parks
2500

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) 375-5186

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 6,000 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 _____

1. Full legal name of the requesting organization: American Cancer Society

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.):

Jennifer Lopez Jennifer.Lopez@Cancer.org
8095 NW 12th Street 754.235.16584 Cell
Doral, FL 33126 305.592.5140 Fax

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

From Parks and Rec. Charge
Showmobile 27x16 From Police Two light tower generators 6
tables and 20 chairs and 1 large tent 20x30 From Solid Waste
10 FT Gas waste Cans 64 gallons

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FEE WAIVER/KIND SERVICES APPLICATION
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5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): Relay For Life
's A overnight 18 hour Fund Raising event for the
American Cancer Society. The money raised
goes for research, programs and services that are
offered free to community and cancer prevention.

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)):

Betty T. Ferguson Complex
3000 NW 199th St
Miami Gardens, FL 33056

8. Description of regional or local impact: Gives community a chance to help raise money
and awareness for cancer programs, services and research.
It also provides the community a place to remember loved
ones who have passed and honor those who have
survived.

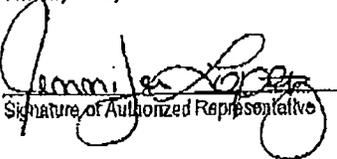
9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable):

Set-up begins at 10:30 am April 29 and breakdown
ends at 1:00 pm April 30. I will provide a schedule
for the 18 hour event once it is complete.

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FEE WAIVER/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): The event will be held outside on the track area at the Betty T Ferguson Center. Detailed map will follow once complete. if needed
11. Expected number of participants and estimated attendance (per day, if applicable): 500 people
12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): The budget is \$3500. We depend on sponsors and in kind donations

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


Signature of Authorized Representative

3/14/11
Date

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Detail by Entity Name

Foreign Non Profit Corporation

AMERICAN CANCER SOCIETY, INC.

Filing Information

Document Number F01000002790
FEI/EIN Number 131788491
Date Filed 05/24/2001
State NY
Status ACTIVE
Last Event CANCEL ADM DISS/REV
Event Date Filed 11/05/2004
Event Effective Date NONE

Principal Address

250 WILLIAMS ST. NW
ATLANTA GA 30303-1002

Changed 06/08/2007

Mailing Address

OFFICE OF CORP. COUNSEL
250 WILLIAMS STREET
ATLANTA GA 30303-1002

Changed 04/08/2008

Registered Agent Name & Address

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE FL 32301 US

Name Changed: 06/28/2005

Address Changed: 02/11/2011

Officer/Director Detail

Name & Address

Title P

PARTRIDGE, EDWARD E
250 WILLIAMS STREET
ATLANTA GA 30303-1002 US

Title S

JOHNSON, LILA R
250 WILLIAMS STREET

Memorandum



Date: June 7, 2011

To: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

From: Alina T. Hudak
County Manager

A handwritten signature in black ink, appearing to read "Alina T. Hudak". The signature is written in a cursive, flowing style.

Subject: District Specific In-Kind 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, American Cancer Society, Inc. for their "Relay for Life" event held on April 29, 2011.

In-kind services have been requested in an amount not to exceed \$2,500 from the Miami-Dade Park and Recreation Department for the use of a large show mobile. This event will be funded from the unspent balance of the District 1 FY 2008-09 in-kind reserve fund.

During FY 2010-11, American Cancer Society, Inc. received \$500 from District 3 office funds, \$140 from District 4 office funds and \$2,500 from District 12 office funds. Additionally, they received \$650 from District 3 for in-kind services.

Inkind01611

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