



## MEMORANDUM

Agenda Item No. 11(A)(16)

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

**DATE:** March 6, 2012

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

**SUBJECT:** Resolution retroactively  
authorizing in-kind services  
for the December 16, 2011  
"Holiday Performance" event

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

A handwritten signature in black ink, appearing to read "RAC Jr", written over a horizontal line.

R. A. Cuevas, Jr.  
County Attorney

RAC/cp



# MEMORANDUM

(Revised)

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

**DATE:** March 6, 2012

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

**SUBJECT:** Agenda Item No. 11(A)(16)

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)(16)  
3-6-12

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

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION, AND OPEN SPACES DEPARTMENT FOR THE DECEMBER 16, 2011 "HOLIDAY PERFORMANCE" EVENT SPONSORED BY THE PARADISE CHRISTIAN SCHOOL AND DEVELOPMENT CENTER, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$790.00 TO BE FUNDED FROM THE DISTRICT 12 FY 2011-12 IN-KIND RESERVE FUND

**WHEREAS**, Paradise Christian School and Development Center, Inc., has requested in-kind services from the Parks, Recreation, and Open Spaces Department for the December 16, 2011 "Holiday Performance" event in an amount not to exceed \$790.00 (see attached Fee Waiver/In-kind Service Application); and

**WHEREAS**, children of all ages participate in the "Holiday Performance" which celebrates the holidays and is open to the public free of charge; and

**WHEREAS**, Paradise Christian School and Development Center, Inc. is a not-for-profit organization; and

**WHEREAS**, the "Holiday Performance" is a special event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and \$790.00 of the in-kind services shall be funded from the District 12 FY 2011-12 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 Parks, Recreation, and Open Spaces Department for the December 16, 2011 "Holiday Performance" sponsored by Paradise Christian School and

Development Center, Inc., in an amount not to exceed \$790.00 to be funded from the District 12 FY 2011-12 In-Kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Jose "Pepe" Diaz. 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 6th day of March, 2012. 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

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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: Paradise Christian School & Development Center, 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.): \_\_\_\_\_  
Dr. Eileen Floney  
6184 West 21 Court, Hialeah, FL 33016  
305-828-7477      Imparadiz@aol.com
4. Specify fee waiver or in-kind service requested (quantify, if applicable): \_\_\_\_\_  
stage (portable)

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

December 16, 2011  
Holiday Performance by children ages 2-5.  
Anticipated audience over 950 (As previous years)  
Community is invited - Free of charge

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)): \_\_\_\_\_

6784 West 21 Court, Hialeah, FL 33016

8. Description of regional or local impact: Performing Arts - an appreciation

for the arts as well as holiday awareness and cultural impact. Our children "Head Start" are from families below poverty level - giving these families hope and inspiration through the production of their children.

9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): Dec. 16, 2011

set up 10am.  
show time 6:30pm.  
clean up 9pm

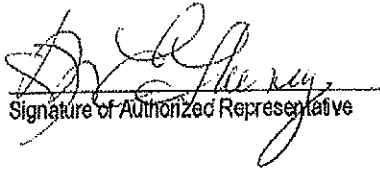
10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable):

WEST 21 COURT.  
Streets are closed - event in front of school

11. Expected number of participants and estimated attendance (per day, if applicable): Approx 950

12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): Event is sponsored by community leaders and families.

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

  
Signature of Authorized Representative

10-6-2011  
Date

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**Fee Waiver/In-kind Services Application Check List**

- ✓ 1. Is every item on the application completed?
- ✓ 2. Is the **Full Legal Name** of the organization listed on the application? Example:
- If the legal name of an organization is "We Fight Cancer One Person At a Time, Inc." that is what the application should state and not simply, "We Fight Cancer".
- ✓ 3. Is a copy of the non-profit status included with the application? A copy of that information can be downloaded from the Florida Corporation's Website:
- <http://www.sunbiz.org/corpweb/inquiry/cormenu.html>
- ✓ 4. Are the following items indicated:
1. Type of Event (i.e. special, major, district, or small)
  2. Applicant Status
  3. Name of the Contact person for the organization
  4. Physical Address of the Event
  5. Specify the fee waiver or in-kind service requested
- ✓ 5. Have you included an event budget for "Special" and "Major" event types?
- ✓ 6. Has the authorized organization representative signed the application?

**NOTE: ALL QUESTIONS MUST BE ANSWERED. IF ANY INFORMATION IS MISSING, THE APPLICATION WILL NOT BE ACCEPTED.**

For OSBM Staff Use Only

       Complete package received

       Incomplete package, return to \_\_\_\_\_ District \_\_\_\_\_

Reason(s): \_\_\_\_\_

\_\_\_\_\_





**SHOWMOBILES, STAGES, BLEACHERS,  
AND SOUND PRODUCTION**  
(305) 226-8315 Ext. 221/(305) 553-8511 (Fax)

**EQUIPMENT (S) CONFIRMATION FORM**

ORGANIZATION/AGENCY: Paradise Christian School & Development Center

EQUIPMENT REQUESTED: Stage 24' x 40'

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Commissioner Jose "Pepe" Diaz,  
Commission District #12

OR INDEX CODE (MIAMI-DADE AGENCIES ONLY): \_\_\_\_\_

BILLING ADDRESS/ZIP CODE: 111 NW 1<sup>st</sup> Street Suite

NAME/TITLE OF THE EVENT: Christmas Event

ADDRESS OF EVENT: 6184 West 21 Court Hialeah, FL

TODAY'S DATE: 12/6/11 DATE (S) & TIME OF EVENT: 12/16/11 6PM - 8:30PM

SET-UP TIME & DAY: 10:00AM 12/16/11

TAKE-DOWN & DAY: 9PM 12/16/11

CONTACT PERSON/PHONE: Dr. Eileen Fluney 305-828-7477

AT SITE CONTACT/CELL PHONE#: \_\_\_\_\_

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: \$790.00 In-kind District #12

\*(SEE FEE SCHEDULE FOR EXACT CHARGES)

Signature: \_\_\_\_\_

*Andy Dielingen*  
Commissioner Jose "Pepe" Diaz

Agency/Group: Commission District 12

**CANCELLATIONS MUST BE MADE 72 HOURS IN ADVANCE OF THE  
EVENT BY FAX OR EMAIL OTHERWISE EXPECT TO BE CHARGED**

**½ (HALF) OF RENTAL FEE. \*There will be no completed reservation on the schedule unless the  
confirmation form is filled out completely and signed.**

Late equipment arrivals, please call (786) 236-7926



## Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

DR-14  
R. 04/05  
01/06/10

85-8012656733C-2	01/31/2010	01/31/2015	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

PARADISE CHRISTIAN SCHOOL AND  
DEVELOPMENT CENTER INC  
6184 W 21ST CT  
HIALEAH FL 33016-2654

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



## Important Information for Exempt Organizations

DR-14  
R. 04/05

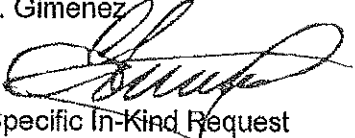
1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (FAC).
2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others by your organization of tangible personal property, sleeping accommodations or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, FAC).
5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third degree felony. Any violation will necessitate the revocation of this certificate.
6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Central Registration at 850-487-4130. The mailing address is PO BOX 6480, Tallahassee, FL 32314-6480.

# Memorandum



**Date:** March 6, 2012

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



**From:** Carlos A. Gimenez  
Mayor 

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

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A retroactive waiver for in-kind services has been requested by a not-for-profit organization, Paradise Christian School and Development Center, Inc., for their "Holiday Performance" event held on December 16, 2011.

In-kind services have been requested in an amount not to exceed \$790 from the Parks, Recreation, and Open Spaces Department for the use of a 24' X 40' stage. This event will be funded from the District 12 FY 2011-12 in-kind reserve fund.

  
Deputy Mayor 

Inkind012004