

MEMORANDUM

Agenda Item No. 3(A)(5)


TO: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

DATE: July 2, 2013

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

SUBJECT: Resolution retroactively
authorizing in-kind services
for the April 27, 2013
"Annual Love Fest"

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



R. A. Cuevas, Jr.
County Attorney

RAC/smm



MEMORANDUM

(Revised)

TO: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

DATE: July 2, 2013

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

SUBJECT: Agenda Item No. 3(A)(5)

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 Mayor'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. 3(A)(5)
7-2-13

RESOLUTION NO. _____

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARKS, RECREATION AND OPEN SPACES DEPARTMENT FOR THE APRIL 27, 2013 "ANNUAL LOVE FEST" SPONSORED BY THE SWEET HOME MISSIONARY BAPTIST CHURCH, INCORPORATED, OF MIAMI IN AN AMOUNT NOT TO EXCEED \$790.00 TO BE FUNDED FROM THE BALANCE OF THE DISTRICT 9 FY 2012-13 IN-KIND RESERVE FUND

WHEREAS, the Sweet Home Missionary Baptist Church, Incorporated, of Miami has requested in-kind services from the Miami-Dade Parks, Recreation and Open Spaces Department for the April 27, 2013 "Annual Love Fest" in an amount not to exceed \$790.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the purpose of the "Annual Love Fest" is to bring members of the community together in an event providing music, refreshments and food; and

WHEREAS, participants will benefit from the distribution of free goods such as clothing, shoes, books and household items; and

WHEREAS, the Sweet Home Missionary Baptist Church, Incorporated, of Miami is a not-for-profit organization; and

WHEREAS, the "Annual Love Fest" is a district 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 balance of the District 9 FY 2012-13 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 Parks, Recreation and Open Spaces

Department for the April 27, 2013 "Annual Love Fest" sponsored by the Sweet Home Missionary Baptist Church, Incorporated, of Miami in an amount not to exceed \$790.00 to be funded from the balance of District 9 FY 2012-13 In-Kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Dennis C. Moss. 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:

Rebeca Sosa, Chairwoman
Lynda Bell, Vice Chair

Bruno A. Barreiro
Jose "Pepe" Diaz
Sally A. Heyman
Jean Monestime
Sen. Javier D. Souto
Juan C. Zapata

Esteban L. Bovo, Jr.
Audrey M. Edmonson
Barbara J. Jordan
Dennis C. Moss
Xavier L. Suarez

The Chairperson thereupon declared the resolution duly passed and adopted this 2nd day of July, 2013. 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

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

Dennis Moss

1. Full legal name of the requesting organization:

Sweet Home Missionary Baptist Church

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.):

Annette King
7/6/712 1962 Sweet Home Missionary Baptist
Church 10701 SW 184th St Miami FL 33157
305 251-5753

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

1 20x40 stage

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): Sweet Home Missionary Baptist church / Love Fest. This will be a flea market setting. Items will be given to our community such as clothes shoes, household goods, books, music refreshments, etc.

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)): 10701 SW 184th St
Miami FL 33157

8. Description of regional or local impact: 150 - 200 People

9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): setup time 8:30 am / starting time for event 10:00 am - 1:00 pm / breakdown time 1:15 pm - 2:30 pm.

MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION
Page 3

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


Date



Sweet Home Missionary Baptist Church
Pastor Theo Johnson, Servant

April 10, 2013

To: Diana Perez

From: Sweet Home MB Church
10701 SW 184 Street
Miami, FL. 33157

RE: Donation Letter – Love Fest 2013

Sweet Home Missionary Baptist Church is presenting their annual Love Fest on Saturday, April 27, 2013 from 10:00 am – 1:00 pm. This is a time when we give back to our community in a loving way. This event is geared to provide items to our community that they may have needs for such as: clothing, books, house hold items and much more.

There will be music, fun and food for the spirit and body. You can help make this a successful event by providing a 20X40 stage. This will allow us to provide excellent service to our community.

We will be forever grateful for your kindness. Thanking you in advance for your continued support.

Ms. Annette King
Sweet Home Missionary Baptist Church
Outreach Ministry

cc: Pastor Theo Johnson
Sweet Home Missionary Baptist Church
Interim Pastor

Building the House, Advancing the Kingdom
10701 SW 184th Street, Miami, Florida 33157 * Office (305) 251-5753 * Fax (305) 251-3497
www.sweethome.org



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

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: Sweet Home Missionary Baptist Church

EQUIPMENT REQUESTED: Stage 24' x 40'

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Commissioner Dennis Moss,
Commission District #9

OR INDEX CODE (MIAMI-DADE AGENCIES ONLY): _____

BILLING ADDRESS/ZIP CODE: 111 NW 1 Street Suite 320 Miami, FL 33128

NAME/TITLE OF THE EVENT: Annual Love Fest

ADDRESS OF EVENT: 10701 SW 184 Street Miami Fl 33157

TODAY'S DATE: 04/27/13 DATE (S) & TIME OF EVENT: 04/27/13 8:30PM - 1PM

SET-UP TIME & DAY: 7AM 04/27/13

TAKE-DOWN & DAY: 3PM 04/27/13

CONTACT PERSON/PHONE: Annette King 786-712-1962

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 JE

*(SEE FEE SCHEDULE FOR EXACT CHARGES)

Signature: *Dennis Moss*

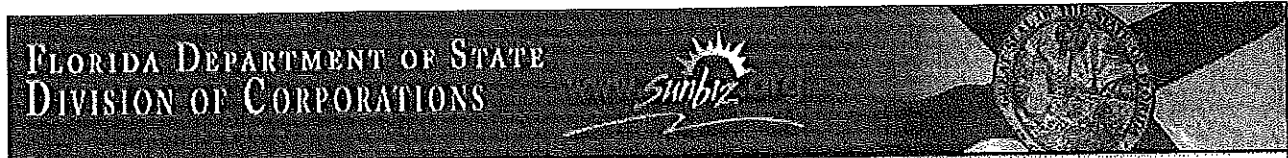
Commissioner Dennis Moss

Agency/Group: Commission District #9

**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



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[Events](#) [No Name History](#)

Entity Name Search

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Detail by Entity Name

Florida Non Profit Corporation

SWEET HOME MISSIONARY BAPTIST CHURCH, INCORPORATED, OF MIAMI

Filing Information

Document Number	N36495
FEI/EIN Number	592766714
Date Filed	02/07/1990
State or Country	FL
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	09/20/1994
Event Effective Date	NONE

Principal Address

10701 SW 184 STREET
MIAMI, FL 33157

Changed: 07/08/2008

Mailing Address

10701 SW 184 STREET
MIAMI, FL 33157

Changed: 07/08/2008

Registered Agent Name & Address

THOMPkins, STANLEY
10701 SW 184 STREET
MIAMI, FL 33157

Name Changed: 01/29/2000

Address Changed: 04/29/2011

Officer/Director Detail

Name & Address

Title TD

THOMPkins, STANLEY
10701 SW 184 STREET
MIAMI, FL 33157

Title P

GORDON, JAMES
10701 SW 184 STREET
MIAMI, FL 33157

Title D

Lee, Tiffani
10701 SW 184 STREET
MIAMI, FL 33157

Annual Reports

Report Year	Filed Date
2011	04/29/2011
2012	04/30/2012
2013	01/27/2013

Document Images

01/27/2013 -- ANNUAL REPORT	View image in PDF format
04/30/2012 -- ANNUAL REPORT	View image in PDF format
04/29/2011 -- ANNUAL REPORT	View image in PDF format
01/06/2010 -- ANNUAL REPORT	View image in PDF format
05/06/2009 -- ANNUAL REPORT	View image in PDF format
07/08/2008 -- ANNUAL REPORT	View image in PDF format
02/13/2007 -- ANNUAL REPORT	View image in PDF format
03/14/2006 -- ANNUAL REPORT	View image in PDF format
02/02/2005 -- ANNUAL REPORT	View image in PDF format
02/11/2004 -- ANNUAL REPORT	View image in PDF format
01/21/2003 -- ANNUAL REPORT	View image in PDF format
01/24/2002 -- ANNUAL REPORT	View image in PDF format
01/23/2001 -- ANNUAL REPORT	View image in PDF format
01/29/2000 -- ANNUAL REPORT	View image in PDF format
02/22/1999 -- ANNUAL REPORT	View image in PDF format
02/04/1998 -- ANNUAL REPORT	View image in PDF format
02/13/1997 -- ANNUAL REPORT	View image in PDF format
03/20/1996 -- ANNUAL REPORT	View image in PDF format
06/30/1995 -- ANNUAL REPORT	View image in PDF format

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**Request for Taxpayer
 Identification Number and Certification**

Give Form to the requester. Do not send to the IRS.

Name (as shown on your income tax return)
Sweet Home Missionary Baptist Church

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification (required):
 Individual/sole proprietor C Corporation S Corporation Partnership Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ Exempt payee

Other (see Instructions) ▶

Address (number, street, and apt. or suite no.)
10701 SW 184th Street

City, state, and ZIP code
Miami, FL 33157-6611

List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number								
			-					

Employer identification number								
59	-	27	66	714				

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here Signature of U.S. person ▶ *[Signature]* Date ▶ **4/14/13**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

In-Kind and CBO Application's
Office of Commissioner Dennis C. Moss

Document Checklist

Sweet Home Missionary Baptist Church.

Fee Waiver/In-Kind application Allocation (CBO)

Approved amount: \$ 790.⁰⁰

Date of Event: April 27, 2013

Add to BCC MEMO: 1 / 1
Only for CBO's

E-mail Forms to organization

Date e-mailed: April 11, 2013

Date received: _____

Completed application – Must be signed and dated

Application forms

W-9

www.Sunbiz.com (Active)

Request estimate from Parks and Complete Equipment
Confirmation Form (In-Kind ONLY) Waiting

Request for Resolution to be drafted (e-mail: Viviane Gonzalez Cao)

Date: _____

MS. King
S 726.712.1962

ONLY COMPLETE PACKAGES WILL BE ACCEPTED

Memorandum



Date: July 2, 2013

To: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

From: Carlos A. Gimenez
Mayor

A handwritten signature in cursive script, appearing to read "Carlos A. Gimenez".

Subject: District Specific In-Kind Request

A retroactive waiver for in-kind services has been requested by Sweet Home Missionary Baptist Church, Incorporated of Miami, for their "Annual Love Fest" event held on April 27th, 2013.

In-kind services have been requested in an amount not to exceed \$790 from the Miami Dade Parks, Recreation and Open Spaces Department for the use of a 24' x 40' stage. This event will be funded from the balance of District 9 FY 2012-13 In-Kind Reserve Fund.

A handwritten signature in cursive script, appearing to read "Edward Marquez".

Edward Marquez
Deputy Mayor

Inkind01334