

MEMORANDUM

Agenda Item No. 3(A)(10)

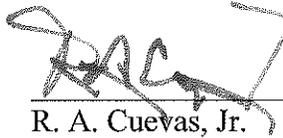
TO: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

DATE: September 3, 2014

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

SUBJECT: Resolution retroactively
authorizing in-kind for the
May 31, 2014 "Surf Bal Bay
Relay for Life" event

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/smm



MEMORANDUM
(Revised)

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

DATE: September 3, 2014

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

SUBJECT: Agenda Item No. 3(A)(10)

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)(10)
9-3-14

RESOLUTION NO. _____

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION AND OPEN SPACES DEPARTMENT FOR THE MAY 31, 2014 "SURF BAL BAY RELAY FOR LIFE" EVENT SPONSORED BY THE AMERICAN CANCER SOCIETY, INC. IN AN AMOUNT NOT TO EXCEED \$650.00 TO BE FUNDED FROM THE BALANCE OF THE DISTRICT 4 FY 2013-14 IN-KIND RESERVE FUND

WHEREAS, the American Cancer Society, Inc. has requested in-kind services from the Parks, Recreation and Open Spaces Department for the May 31, 2014 "Surf Bal Bay Relay for Life" event in an amount not to exceed \$650.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the purpose of the "Surf Bal Bay Relay for Life" event is to bring awareness to the community regarding cancer programs and treatments, and to raise funds for cancer prevention research programs and other services offered to members of the community; and

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

WHEREAS, the "Surf Bal Bay Relay for Life" is a special event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and \$650.00 of the in-kind services shall be funded from the balance of the District 4 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 Parks, Recreation and Open Spaces Department for the May 31, 2014 "Surf Bal Bay Relay for Life" event sponsored by the American Cancer Society, in an amount not to exceed \$650.00 to be funded from the balance of District 4 FY 2013-14 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:

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 3rd day of September, 2014. 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) 375-6143
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 _____

1. Full legal name of the requesting organization: Surf Bait Bay Relay-for-Life
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.):
Pamela Flanckers-Alvin
786-348-3258
4. Specify fee waiver or in-kind service requested (quantify, if applicable): use of the stage

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

May 31, 2014
Surf Bal Bay Relay-For Life

event will be awareness to the community about cancer treatments, programs, and other.

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)): _____

1155 93 Street Bay Harbor Islands, FL 33154

8. Description of regional or local impact: getting the community aware of the research and services of the American Cancer Society. The time frame of relay is usually the first treatment for someone with cancer.

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

actual event will be from 9:00a to 9:00p
Set up for the event will start Saturday @ 7:00a
breakdown will be immediately after event ends until 12:00.

10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): venue is the school's field. access to the field will be 95 Street.

11. Expected number of participants and estimated attendance (per day, if applicable): 1,000

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

05-01-2014
Date



**SHOWMOBILES, STAGES, BLEACHERS,
AND SOUND PRODUCTION**
(305) 226-8315 Ext. 224/(305) 553-8511 (Fax)

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: American Cancer Society (Bal Harbour Police Department)

EQUIPMENT REQUESTED: Stage 16 X 16

NAME OF PERSON RESPONSIBLE FOR THIS BILL: _____

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

BILLING ADDRESS/ZIP CODE: _____

NAME/TITLE OF THE EVENT: Surf Bal Bay Relay for Life

ADDRESS OF EVENT: 1155 93 Street; Bay Harbor Islands, FL 33154

TODAY'S DATE: 0 DATE (S) & TIME OF EVENT: 0531 2014

SET-UP TIME & DAY: 6:00-8:00a (05312014)

TAKE-DOWN TIME & DAY: after 9:00p

CONTACT PERSON/PHONE: Pamela Flanders-Alvin 786-348-3258
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: \$ 650.00

Signature: Pamela Flanders

*(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**

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) 230-7926

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS**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	CORPORATE MERGER
Event Date Filed	08/30/2012
Event Effective Date	09/01/2012

Principal Address250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Changed: 06/08/2007

Mailing AddressOFFICE OF CORP. COUNSEL
250 WILLIAMS STREET
ATLANTA, GA 30303-1002

Changed: 04/08/2008

Registered Agent Name & AddressCT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

Name Changed: 12/13/2012

Address Changed: 12/13/2012

Officer/Director Detail**Name & Address**

Title Secretary/Treasurer, Director

Heist, Daniel P

9

250 WILLIAMS STREET
ATLANTA, GA 30303-1002

Title President

Bontrager, Gregory P
250 WILLIAMS STREET
ATLANTA, GA 30303-1002

Title CFO

MICKLE, CATHERINE E
250 WILLIAMS STREET
ATLANTA, GA 30303-1002

Title AS

Phillips, Timothy B
250 WILLIAMS STREET
ATLANTA, GA 30303-1002

Title CEO

SEFFRIN, JOHN RPHD
250 WILLIAMS STREET
ATLANTA, GA 30303-1002

Title Director

Alfonso, John
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Baskies, Arnold M
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Brookland, Robert K, MD
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Cullen, Kevin J, MD
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Earnest, Bryan K

250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Goffney, Willie H, MD
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Hamilton, John W, DDS
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Heflin, Eugene D
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Henderson, Allen H
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Henry, Susan D
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Hernandez, Enrique, MD
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Jackson, Carol
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Kean, Jeffrey L
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Kelsey, Douglas K, MD

//

250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Meyerhoffer, Pamela K
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Mueller, Scarlott K
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Reedy, Gary M
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Rose, Clement S, MD
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Warne, Donald K, MD
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Title Director

Youle, Robert E
250 WILLIAMS ST. NW
ATLANTA, GA 30303-1002

Annual Reports

Report Year	Filed Date
2012	03/14/2012
2013	03/22/2013
2014	04/03/2014

Document Images

04/03/2014 -- ANNUAL REPORT	View image in PDF format
03/22/2013 -- ANNUAL REPORT	View image in PDF format
12/13/2012 -- Reg. Agent Change	View image in PDF format
08/30/2012 -- Merger	View image in PDF format

03/14/2012 -- ANNUAL REPORT	View image in PDF format
03/03/2011 -- ANNUAL REPORT	View image in PDF format
02/23/2010 -- ANNUAL REPORT	View image in PDF format
03/30/2009 -- ANNUAL REPORT	View image in PDF format
04/08/2008 -- ANNUAL REPORT	View image in PDF format
04/06/2007 -- ANNUAL REPORT	View image in PDF format
04/14/2006 -- ANNUAL REPORT	View image in PDF format
09/10/2005 -- ANNUAL REPORT	View image in PDF format
06/28/2005 -- Reg. Agent Change	View image in PDF format
11/05/2004 -- REINSTATEMENT	View image in PDF format
07/14/2003 -- ANNUAL REPORT	View image in PDF format
09/03/2002 -- ANNUAL REPORT	View image in PDF format
04/09/2002 -- Reg. Agent Change	View image in PDF format
05/24/2001 -- Foreign Non-Profit	View image in PDF format

Frsluikwz #3qg#2u4dfi#3rdflw
Vvdwh# #ffrcubd/#3 haduo hqwk# jNvdh

Memorandum



Date: September 3, 2014

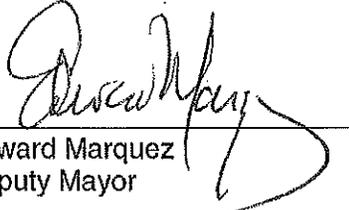
To: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

From: Carlos A. Gimenez
Mayor 

Subject: District Specific In-Kind Request

A retroactive waiver for in-kind services has been requested by American Cancer Society, Inc., for their "Surf Bal Bay Relay for Life" event held on May 31, 2014.

In-kind services have been requested in an amount not to exceed \$650 from the Parks, Recreation and Open Spaces Department for the use of a 16' x 16' stage. This event will be funded from the balance of District 4 FY 2013-14 In-Kind Reserve Fund.


Edward Marquez
Deputy Mayor

Inkind01456