MEMORANDUM

Agenda Item No. 3(A)(3)

TO:	Honorable Chairman Jean Monestime and Members, Board of County Commissioners	**DATE:**	November 3, 2015
FROM:	Abigail Price-Williams County Attorney	**SUBJECT:**	Resolution retroactively authorizing in-kind services for the August 15, 2015 "Fun Day Back to School 2015" event

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

Abigail Price-Williams
County Attorney

APW/smm

MEMORANDUM

(Revised)

TO: Honorable Chairman Jean Monestime
and Members, Board of County Commissioners

DATE: November 3, 2015

FROM: Abigail Price-Williams
County Attorney

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

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**

_____ **Statement of social equity 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)(3)
11-3-15

RESOLUTION NO. _____

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION AND OPEN SPACES DEPARTMENT FOR THE AUGUST 15, 2015 "FUN DAY BACK TO SCHOOL 2015" EVENT SPONSORED BY CURLEY'S HOUSE OF STYLE, INC. IN AN AMOUNT NOT TO EXCEED $2,430.00 TO BE FUNDED FROM THE BALANCE OF THE DISTRICT 3 FY 2015-16 IN-KIND RESERVE FUND

WHEREAS, Curley's House of Style, Inc. has requested in-kind services from the Parks, Recreation and Open Spaces Department for the August 15, 2015 "Fun Day Back to School 2015" event in an amount not to exceed $2,430.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the "Fun Day Back to School 2015" event is a family-friendly event which will distribute backpacks, school supplies, and provide free healthcare information and testing; and

WHEREAS, Curley's House of Style, Inc. is a not-for-profit organization; and

WHEREAS, the "Fun Day Back to School 2015" is a district event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and $2,430.00 of the in-kind services shall be funded from the balance of the District 3 FY 2015-16 In-Kind Reserve funds,

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 August 15, 2015 "Fun Day Back to School 2015" event sponsored by Curley's House of Style, Inc. in an amount not to exceed $2,430.00 to be funded from the balance of the District 3 FY 2015-16 In-Kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Audrey M. Edmonson. 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:

Jean Monestime, Chairman
Esteban L. Bovo, Jr., Vice Chairman

Bruno A. Barreiro	Daniella Levine Cava
Jose "Pepe" Diaz	Audrey M. Edmonson
Sally A. Heyman	Barbara J. Jordan
Dennis C. Moss	Rebeca Sosa
Sen. Javier D. Souto	Xavier L. Suarez
Juan C. Zapata	

The Chairperson thereupon declared the resolution duly passed and adopted this 3rd day of November, 2015. This resolution shall become effective upon the earlier of (1) 10 days after the date of its adoption unless vetoed by the County Mayor, and if vetoed, shall become effective only upon an override by this Board, or (2) approval by the County Mayor of this Resolution and the filing of this approval with the Clerk of the 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

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 Audrey M. Edmonson, District 3

1. Full legal name of the requesting organization: Curley's House of Style, 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.): 305-759-9805
   LaVern Elis Scott - Executive Director - 786-262-2851
   Laverne P. Holliday - Assistant Director - 786-237-9435
   curleyshouse6025@yahoo.com

4. Specify fee waiver or in-kind service requested (quantity, if applicable): Large Showmobile, Generator
   two Bounce Houses

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

Saturday, August 15, 2015
To distribute back packs, school supplies and provide healthcare information and free testing to the community.

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)):

Olinda Park
2101 NW 51st Street
Miami, Florida 33142

8. Description of regional or local impact:

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

10 a.m. - 2 p.m.

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): 2,000.

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

9/2/2015
Date

MIAMI-DADE PARKS

SHOWMOBILES, STAGES, BLEACHERS, AND SOUND PRODUCTION

(305) 226-8315 Ext. 221/(305) 553-8511 (Fax)

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: Curley House of Style

EQUIPMENT REQUESTED: Showmobile Large, Generator 25kw and Bounce Houses (2)

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Commissioner Audrey M. Edmonson Commission District #3

OR INDEX CODE (MIAMI-DADE AGENCIES ONLY):

BILLING ADDRESS/ZIP CODE: 2525 NW 62 Street Suite 4200

NAME/TITLE OF THE EVENT: Fun Day Back to School 2015

ADDRESS OF EVENT: Olinda Park 2101 NW 51 Street

TODAY'S DATE: 08/10/15 **DATE (S) & TIME OF EVENT:** 08/15/15 10AM – 2PM

SET-UP TIME & DAY: 8AM 08/15/15

TAKE-DOWN & DAY: 3PM 08/15/15

CONTACT PERSON/PHONE: Gina Vargas 305-360-9477
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:** $2,430.00 In-kind District #3 **Signature:** Audrey M. Edmonson
*(SEE FEE SCHEDULE FOR EXACT CHARGES) Commissioner Edmonson
Agency/Group: Commission District #3

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

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Detail by Entity Name

Florida Non Profit Corporation

CURLEY'S HOUSE OF STYLE, INC.

Filing Information

Document Number	N00000005611
FEI/EIN Number	651042723
Date Filed	08/21/2000
State	FL
Status	ACTIVE

Principal Address

6025 NW 6 CT
MIAMI, FL 33127

Changed: 04/05/2009

Mailing Address

6025 NW 6 CT
MIAMI, FL 33127

Changed: 04/28/2011

Registered Agent Name & Address

COCHRAN, FAYE
6025 NW 6 COURT
MIAMI, FL 33127

Name Changed: 04/29/2003

Address Changed: 04/29/2003

Officer/Director Detail

Name & Address

Title DP

ELIE, LAVERN
6301 NW 7TH AVE
MIAMI, FL 33150

Title DP

HOLLIDAY, LAVERNE

9507 NW 2 CT
MIAMI, FL 33150

Title Secretary

COCHRAN, FAYE
6025 NW 6TH COURT
MIAMI, FL 33150

Title RA

MARTHA, WELLS-WHISBY
9143 SW 77 AVE B808
MIAMI, FL 33156

Title Pastor

MCKEAL, BERNICE
6025 NW 6 CT
MIAMI, FL 33127

Title VP

BOONE, REATHEA
18941 NW 7 CT
MIAMI, FL 33169

Title Treasurer

GAUSE, SANDRA
5900 NW 6 AVE
APT 407
MIAMI, FL 33127

Title Officer

MIMS, FRED
1900 SANS SOUCI BLVD
APT 213
MIAMI, FL 33181

Title VC

LINDER, DWAYNE D, Sr.
6025 NW 6 CT
MIAMI, FL 33127

Annual Reports

Report Year	Filed Date
2012	04/23/2012
2013	04/29/2013
2014	04/30/2014

Memorandum

MIAMI-DADE COUNTY

Date: November 3, 2015

To: Honorable Chairman Jean Monestime
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 Curley's House of Style, Inc. for their "Fun Day Back to School 2015" event held on August 15, 2015.

In-kind services have been requested in an amount not to exceed $2,430.00 from the Parks, Recreation and Open Spaces Department contributing towards their in-kind request. This event will be funded from the balance of District 3 FY 2015-16 In-Kind Reserve Fund.

Edward Marquez
Deputy Mayor

Inkind01547