

MEMORANDUM

Agenda Item No. 3(A)(3)


TO: Honorable Chairman Esteban L. Bovo, Jr.
and Members, Board of County Commissioners

DATE: April 10, 2018

FROM: Abigail Price-Williams
County Attorney

SUBJECT: Resolution retroactively
authorizing in-kind services
from the Parks, Recreation and
Open Spaces Department for the
December 17, 2017 "Handel
Messiah Concert" sponsored
by the Lemon City Cemetery
Community Corporation in the
amount of \$190.00 to be funded
from the balance of the District 3
FY 2017-18 In-Kind Reserve
Fund

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


Abigail Price-Williams
County Attorney

APW/smm

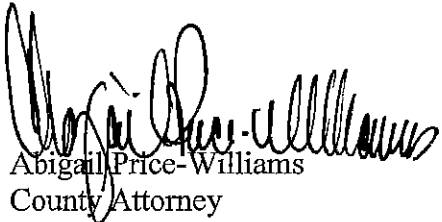


MEMORANDUM

(Revised)

TO: Honorable Chairman Esteban L. Bovo, Jr.
and Members, Board of County Commissioners

DATE: April 10, 2018

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)
4-10-18

RESOLUTION NO. _____

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION AND OPEN SPACES DEPARTMENT FOR THE DECEMBER 17, 2017 "HANDEL MESSIAH CONCERT" SPONSORED BY THE LEMON CITY CEMETERY COMMUNITY CORPORATION IN THE AMOUNT OF \$190.00 TO BE FUNDED FROM THE BALANCE OF THE DISTRICT 3 FY 2017-18 IN-KIND RESERVE FUND

WHEREAS, the Lemon City Cemetery Community Corporation has requested in-kind services from the Parks, Recreation and Open Spaces Department for the December 17, 2017 "Handel Messiah Concert" in an amount not to exceed \$190.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the "Handel Messiah Concert" is a free event which brings a variety of music to the community including classical, spiritual, and gospel; and

WHEREAS, the Lemon City Cemetery Community Corporation is a not-for-profit organization; and

WHEREAS, the "Handel Messiah Concert" is a district event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and \$190.00 of the in-kind services shall be funded from the balance of District 3 FY 2017-18 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 December 17, 2017 "Handel Messiah Concert" sponsored by the Lemon City Cemetery Community Corporation, in an amount not to exceed \$190.00 to be funded from the balance of the District 3 FY 2017-18 In-Kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Vice Chairwoman 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:

Esteban L. Bovo, Jr., Chairman	
Audrey M. Edmonson, Vice Chairwoman	
Bruno A. Barreiro	Daniella Levine Cava
Jose "Pepe" Diaz	Sally A. Heyman
Barbara J. Jordan	Joe A. Martinez
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 10th day of April, 2018. 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) 375-5188

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

Vice Chair Audrey Edmonson

1. Full legal name of the requesting organization:

Lemon City Cemetery Community Corporation

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.):

Enid C. PINKNEY Ph. 305-638-5800 - Fax 305-638-5887

4990 N.W. 31st Avenue

trust@historichampton.net

Miami, Florida

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

2 RISEMS



MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION
Page 2

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

Handel's Messiah Concert of Bridging Classics of the Past with
Classics of the Future. The purpose of the concert is to present a
first class concert with orchestra to the Liberty City, Brownsville and
surrounding communities. It is a free concert for the
benefit of 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)):

1835 N. W. 5th Street District 3

8. Description of regional or local impact: Anyone can attend the concert. It has been
advertised in the Miami Times, Miami Herald and other
and imitations as well as e-mail blasts have been sent to
people all over Miami-Dade County. Persons from various
zip codes usually attend

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

1: P.M. To 8: P.M.

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 take place at The Church of the Incarnation
11. Expected number of participants and estimated attendance (per day, if applicable): 300
12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): \$10,000.00

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

Erin E. Pinkney
Signature of Authorized Representative

12-12-17
Date



**SHOWMOBILES, STAGES, BLEACHERS,
AND SOUND PRODUCTION**
(305) 226-8315 Ext. 4/(305) 553-8511 (Fax)

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: Lemon City Cemetery Community Corporation

EQUIPMENT REQUESTED: Risers (2)

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

OR INDEX CODE (MIAMI-DADE AGENCIES ONLY): N/A

BILLING ADDRESS/ZIP CODE: 5400 NW 22 Ave Miami, FL 33142

NAME/TITLE OF THE EVENT: Handel's Messiah Concert

ADDRESS OF EVENT: Church of the Incarnation 1835 NW 54 Street

TODAY'S DATE: 12/12/17

DATE (S) & TIME OF EVENT: 12/17/17 4 PM

SET-UP TIME & DAY: 12/17/17 12PM

TAKE-DOWN TIME & DAY: 12/17/17 7 PM

CONTACT PERSON/PHONE: Marsha James 305-905-2435

AT SITE CONTACT/CELL PHONE#: Same as above

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 also understand that the total fee is to be remitted (15) fifteen working days before the event.

*Fee: \$190.00 Invoice

*(SEE FEE SCHEDULE FOR EXACT CHARGES)

Signature: Audrey M. Edmonson

Commissioner Audrey 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

- My organization's total administrative expenses (as shown in the yellow line items below) = \$10,000
- $\$10,000 \times 25\% = \$2,500$ (maximum amount of grant funds that can be used for administrative expenses)
- $\$15,000 - \$2,500 = \$12,500$ (balance available to allocate for other eligible grant expense categories)

Projected Budget Expenses FY2017-2018

EXPENSES	GRANT DOLLARS ALLOCATED ~	CASH MATCH =	TOTAL CASH	IN-KIND
Personnel: Administration	\$0	\$0	0	\$0
Personnel: Artistic	\$0	\$0	0	\$0
Personnel: Technical/Production	\$0	\$0	0	\$0
Outside Artistic Fees/Services	\$4,000	\$6,000	10000	\$0
Outside Other Fees/Services	\$0	\$0	0	\$0
Marketing: ADV/PR/Printing/Publication	\$1,000	\$1,320	2320	\$0
Marketing: Postage/Distribution	\$0	\$150	150	\$0
Marketing: Web	\$0	\$0	0	\$0
Design/Support/Maintenance	\$0	\$0	0	\$0
Travel: In-County	\$0	\$0	0	\$0
Travel: Out of County	\$0	\$0	0	\$0
Equipment Rental	\$0	\$0	0	\$0
Equipment Rental/for Performance, Exhibitions, Events, etc.	\$0	\$0	0	\$0
Equipment Purchase	\$0	\$0	0	\$0
Equipment Purchase/for Performance, Exhibitions, Events, Inc.	\$0	\$0	0	\$0
Space Rental	\$0	\$0	0	\$2,000
Space Rental/for Performance, Exhibitions, Events, Inc.	\$0	\$0	0	\$0
Mortgage/Loan Payments	\$0	\$0	0	\$0
Insurance	\$0	\$0	0	\$0
Insurance/for Performance, Exhibitions, Events, Inc.	\$0	\$0	0	\$0
Utilities	\$0	\$0	0	\$0
Fundraising/Development (Non-Personnel)	\$0	\$0	0	\$0
Merchandise/Concessions/Gift Shop Sales	\$0	\$0	0	\$0
Supplies/Materials	\$0	\$100	100	\$0
Other Expenses				
Video	\$0	\$0	0	\$2,000
	\$0	\$0	0	\$0
	\$0	\$0	\$0	\$0
	\$0	\$0	0	\$0
	\$0	\$0	0	\$0
SUBTOTALS:	6000	7570	12570	4000
TOTAL EXPENSES (Cash plus In-kind)	16570			
Total Projected Administrative Expenses (Cash plus In-kind)	2000			
GRANT AWARD	\$0			
Grant Award minus Grant Dollars Allocated; this field must equal \$0	6000			

Administrative Budget Summary Calculator

Total Administrative Expenses (highlighted in green): \$2,000

MAXIMUM AMOUNT OF THE GRANT AWARD ALLOWED FOR ADMINISTRATIVE EXPENSES (highlighted in yellow): \$500

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PROJECTED Restatement Revenues FY2017-2018 CG, Q1

INSTRUCTIONS:

Enter the REVISED projected budget information in the table below. Your budget must be based upon the exact grant amount recommended (see GRANT AWARD below) and reflect any reduced and/or new revenues.

REMINDER: The total cash expenses MUST equal total cash revenues; total in-kind expenses MUST equal total in-kind revenues.

Grant Award: *
\$5,000

- The "Cash Expenses - Subtotal" field MUST EQUAL the "Cash Revenues Plus Grant Award - Subtotal" field; AND
- The "In-kind Expenses - Subtotal" field MUST EQUAL the "In-kind Revenues - Subtotal" field.

Check your work BEFORE you submit the *Restatement of Project Budget* forms for Department staff review.

A Projected Budget Revenues FY2017-2018			
REVENUES	CASH	IN-KIND	% OF CASH REVENUES
Admissions	\$0		0
Memberships	\$260		2.0604168055529
Tuition/Enrollment Fees	\$0		0
Contracted Services: Outside Programs/ Performances	\$0		0
Contracted Services: Special Exhibition Fees	\$0		0
Contracted Services: Other	\$0		0
Rental Income	\$0		0
Corporate Support	\$0		0
Foundation Support	\$0	\$4,000	0
Private/ Individual Support	\$4,200	\$0	33.412887820162
Other Private Support: Auxiliary Activities	\$0		0
Other Private Support: Special Event Proceeds	\$0		0
Government Grants: Federal	\$0		0
	\$0		0
	\$0		0
Government Grants: State	\$0		0
	\$0		0
	\$0		0
Government Grants: Local	\$0		0
	\$0		0
	\$0		0
Government Grants: The Children's Trust (Direct Funding)	\$0		0
Merchandise/ Concessions/ Gift Shop Revenues	\$0		0
Investment Income (Endowment)	\$0		0
Interest and Dividends	\$0		0
Cash on Hand	\$0		0
OTHER REVENUES			0
Souvenir Journal	\$3,170	\$0	24.741447891806
	\$0	\$0	0
	\$0	\$0	0
	\$0	\$0	0
	\$0	\$0	0
Department of Cultural Affairs Grants			0

Florida Department of State

DIVISION OF CORPORATIONS

[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Detail By Document Number](#) /**Detail by Entity Name**

Florida Not For Profit Corporation

LEMON CITY CEMETERY COMMUNITY CORPORATION

Entity Information

Document Number N09000008390
FEI/EIN Number 80-0478199
Date Filed 08/27/2009
State FL
Status ACTIVE
Last Event REINSTATEMENT
Event Date Filed 09/27/2011

Principal Address

4990 N.W. 31 Street
MIAMI, FL 33142

Changed: 03/19/2017

Mailing Address

4990 N.W. 31st Avenue
MIAMI, FL 33142

Changed: 03/19/2017

Registered Agent Name & Address

PINKNEY, ENID C
4990 N. W. 31ST AVENUE
MIAMI, FL 33142

Officer/Director Detail**Name & Address**

Title Chairman

PINKNEY, ENID C
4990 N. W. 31ST AVENUE
MIAMI, FL 33142

Title VC

Harvey, Errol, Rev. Dr.

//

800 N. Miami Avenue
#303
Miami, FL 33136

Title Treasurer

Stewart, Cecilia
1899 N.W. 1st Court
MIAMI, FL 33136

Title Secretary

Bain, Elizabeth A
2810 N. W. 211th Street
Miami Gardens, FL 33056

Title BOARD MEMBER

STEWART, CECILIA
1899 NW 1ST COURT
MIAMI, FL 33136

Title BOARD MEMBER

LEE, VERA
3221 NW 11TH AVENUE
MIAMI, FL 33127

Annual Reports

Report Year	Filed Date
2015	02/28/2015
2016	03/14/2016
2017	03/19/2017

Document Images

03/19/2017 -- ANNUAL REPORT	View image in PDF format
03/14/2016 -- ANNUAL REPORT	View image in PDF format
02/28/2015 -- ANNUAL REPORT	View image in PDF format
03/20/2014 -- ANNUAL REPORT	View image in PDF format
04/29/2013 -- ANNUAL REPORT	View image in PDF format
04/09/2012 -- ANNUAL REPORT	View image in PDF format
09/27/2011 -- REINSTATEMENT	View image in PDF format
03/01/2011 -- Amendment	View image in PDF format
04/01/2010 -- ANNUAL REPORT	View image in PDF format
08/27/2008 -- Domestic Non-Profit	View image in PDF format

Memorandum



Date: April 10, 2018

To: Honorable Chairman Esteban L. Bovo, Jr.
and Members, Board of County Commissioners

From: Carlos A. Gimenez
Mayor

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

Subject: District Specific In-Kind Request

A retroactive waiver for in-kind services has been requested by the Lemon City Cemetery Community Corporation for their "Handel Messiah Concert" held on December 17, 2017.

In-kind services have been requested in an amount not to exceed \$190.00 from the Parks, Recreation and Open Spaces Department for the use of two risers. This event will be funded from the balance of District 3 FY 2017-18 In-Kind Reserve Fund.

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

Edward Marquez
Deputy Mayor

InKind01745