

Approved \_\_\_\_\_ Mayor  
Veto \_\_\_\_\_  
Override \_\_\_\_\_

Agenda Item No. 11(A)(21)  
04-24-07

**OFFICIAL FILE COPY  
CLERK OF THE BOARD  
OF COUNTY COMMISSIONERS  
MIAMI-DADE COUNTY, FLORIDA**

RESOLUTION NO. R-447-07

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE TRANSIT AGENCY FOR THE FEBRUARY 17, 2007 COMMUNITY HEALTH FAIR SPONSORED BY THE MIAMI-DADE COLLEGE MEDICAL CENTER CAMPUS, A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$850.00 TO BE FUNDED FROM THE DISTRICT 8 IN-KIND RESERVE FUND

**WHEREAS**, the Miami-Dade College Medical Center Campus has requested in-kind services from the Miami-Dade Transit Agency for the February 17, 2007 Community Health Fair in an amount not to exceed \$850.00 (see attached Fee Waiver/In-kind Service Application); and

**WHEREAS**, the Miami-Dade College Medical Center Campus is a not-for-profit organization; and

**WHEREAS**, the Community Health Fair is a special event, as defined in the attached Fee Waiver/In-kind Service Application, and the in-kind services shall be funded from the District 8 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 Transit Agency for the February 17, 2007 Community Health Fair in an amount not to exceed \$850.00 to be funded from the District 8 In-kind Reserve Fund.

The foregoing resolution was sponsored by Commissioner Katy Sorenson and offered by Commissioner Carlos A. Gimenez, who moved its adoption. The motion was seconded by Commissioner Dennis C. Moss and upon being put to a vote, the vote was as follows:

	Bruno A. Barreiro, Chairman	aye		
	Barbara J. Jordan, Vice-Chairwoman	aye		
	Jose "Pepe" Diaz	aye	Audrey M. Edmonson	absent
	Carlos A. Gimenez	aye	Sally A. Heyman	absent
	Joe A. Martinez	aye	Dennis C. Moss	aye
	Dorrin D. Rolle	aye	Natacha Seijas	absent
	Katy Sorenson	aye	Rebeca Sosa	aye
	Sen. Javier D. Souto	aye		

The Chairperson thereupon declared the resolution duly passed and adopted this 24<sup>th</sup> day of April, 2007. 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



**KAY SULLIVAN**  
Deputy Clerk

Approved by County Attorney as  
to form and legal sufficiency.

Monica Rizo

**MEMORANDUM**

Agenda Item No. 11(A)(21)

---

**TO:** Honorable Chairman Bruno A. Barreiro  
and Members, Board of County Commissioners

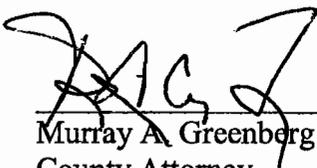
**DATE:** April 24, 2007

**FROM:** Murray A. Greenberg  
County Attorney

**SUBJECT:** Resolution retroactively  
authorizing in-kind services  
for the Community Health  
Fair

---

The accompanying resolution was prepared and placed on the agenda at the request of Commissioner Katy Sorenson.

*ju:*   
\_\_\_\_\_  
Murray A. Greenberg  
County Attorney

MAG/jls



# MEMORANDUM

(Revised)

**TO:** Honorable Chairman Bruno A. Barreiro  
and Members, Board of County Commissioners

**DATE:** April 24, 2007

**FROM:** Murray A. Greenberg  
County Attorney

**SUBJECT:** Agenda Item No. 11(A)(21)

Please note any items checked.

- "4-Day Rule" ("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
- Bid waiver requiring County Manager's written recommendation
- Ordinance creating a new board requires detailed County Manager's report for public hearing
- Housekeeping item (no policy decision required)
- No committee review

Trans # 850 P.2/5

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:

Special Events Staff
Communications Department
111 N.W. 1st Street, Suite 2510
Miami, FL 33128

Phone: (305) 375-2836
Fax: (305) 375-3968

Type of Event/Application (select one of the following):

- Event types: District Event, Small Event, Special Event (checked), Major Event

1. Full legal name of the requesting organization: Miami Dade College, Medical Center Campus

2. Applicant Status: (Select one of the choices below)

- Applicant status options: Not-For-Profit or Tax Exempt, Local Government or Public Entity (checked), For-Profit, County Sponsored Event/Sponsoring Department, Other (specify)

3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.): Bob Wilcosky, 950 N. W. 20th Street, Miami, FL 33127, Fax# (305) 237-4441, rwilcosk@mdc.edu

4. Specify fee waiver or in-kind service requested (quantify, if applicable): One (1) Metro Bus from 8am to 4pm.

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): Miami Dade College Medical Center Campus Community Health Fair. Purpose: To heighten awareness of common health problems among the community and promote healthcare access.

FEB. 17 2007

6. Please select ALL that apply to event

- Event categories: Economic Development, Youth/Education (checked), Health and Social Services (checked), Arts and Culture, Environmental, Sports and Athletics

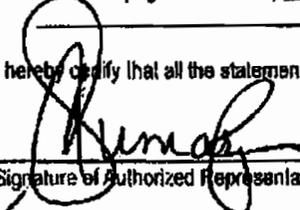
7. Physical address of event venues (please specify Commission District(s)): 950 N. W. 20th Street, Miami, FL 33127, District 8



MIAMI-DADE COUNTY  
FEE WAIVER-IN-KIND SERVICES APPLICATION

- 8. Description of regional or local impact: To provide healthcare information to the community, especially those in need to basic healthcare.  
Participants attending will receive free screenings for glucose, glaucoma, cholesterol and blood pressure.
- 9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): Saturday Feb. 17 2007 from 9:30 AM to 2:00P.M.
- 10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): Please see attached flyer.
- 11. Expected number of participants and estimated attendance (per day, if applicable): 1,000 plus
- 12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): Please see attached budget sheet

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

  
Signature of Authorized Representative

February 7, 2007  
Date

Miami-Dade College  
Medical Center Campus

hosts

# Community Health Fair

Presented by  CareAccess<sup>®</sup>  
HEALTH PLAN

Saturday, February 17, 2007

9:30 a.m. - 2 p.m.

Medical Center Campus

950 N.W. 20th Street, Miami, FL 33127



**FREE TRANSPORTATION**  
from specific locations  
will be provided by  
Miami-Dade Transit

## FREE

### Health Care Access

### FREE screenings!

glucose, blood pressure, cholesterol, dental, vision and glaucoma.

Information on:

prenatal care, diabetes, donating blood,  
nutrition, wellness, asthma and dental care.

For more information  
call 305-257-1209 or visit

[www.mdc.edu/medicalcenter](http://www.mdc.edu/medicalcenter)

 Miami-Dade  
College

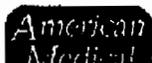
[www.careaccess.com](http://www.careaccess.com)



**Children's Corner!**

Free health  
information,  
face painting  
& balloons.

Thanks to our sponsors:



7



# Memorandum



**Date:** April 24, 2007

**To:** Honorable Chairman Bruno A. Barreiro  
and Members, Board of County Commissioners

**From:** George M. Burgos  
County Manager

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

---

The Office of Strategic Business Management (OSBM) has reviewed the attached in-kind request and recommends for the item to move forward to the Board of County Commissioners for consideration. The district specific in-kind reserve balance allows for the funding of this request.

Background

Miami-Dade College, Medical Center Campus is requesting a retroactive waiver for in-kind services for their Health Fair held on February 17, 2007.

In-kind services have been requested in an amount not to exceed \$850 from the Miami-Dade Transit Department for use of a shuttle bus. This event will be funded from the District 8 district specific in-kind reserve.

As part of the FY 2006-07 Adopted Budget, Miami-Dade College received awards totaling \$579,933.00 funded by the General Fund Discretionary Fund and the Cultural Affairs Department. Of the funds awarded, there were no dollars set aside for the Medical Center Campus.

Inkind006207