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CLERK OF THE BOARD
OF COUNTY COMMISSIONERS
MIAMI-DADE COUNTY, FLORIDA

MEMORANDUM

Agenda Item No. 11(A)(11)

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

DATE: February 5, 2008

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

SUBJECT: Resolution retroactively authorizing in-kind services from Parks for the Praise in the Park Festival & Community Health Fair

Resolution R-126-08

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

R. A. Cuevas, Jr.
County Attorney

RAC/bw

MEMORANDUM

(Revised)

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

DATE: February 5, 2008

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

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

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

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 11(A)(11)
2-5-08

RESOLUTION NO. **R-126-08**

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT FOR THE NOVEMBER 17, 2007 PRAISE IN THE PARK FESTIVAL & COMMUNITY HEALTH FAIR SPONSORED BY WOMEN WITH A PURPOSE, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED $916.00 TO BE FUNDED FROM THE DISTRICT 9 IN-KIND RESERVE FUND

WHEREAS, Women With A Purpose, Inc. has requested in-kind services from the Miami-Dade Park and Recreation Department for the November 17, 2007 Praise in the Park Festival & Community Health Fair in an amount not to exceed $916.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the purpose of the Praise in the Park Festival & Community Health Fair is to provide carnival games for kids, free health screenings services, and health education; and

WHEREAS, Women With A Purpose, Inc. is a not-for-profit organization; and

WHEREAS, the Praise in the Park Festival & Community Health Fair is a small event, as that term is defined on the attached Fee Waiver/In-kind Service Application, and the in-kind services shall be funded from the District 9 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 Park and Recreation Department for the November 17, 2007 Praise in the Park Festival & Community Health Fair in an amount not to exceed $916.00 to be funded from the District 9 In-kind Reserve Fund.

The foregoing resolution was sponsored by Commissioner Dennis C. Moss and offered by Commissioner **Joe A. Martinez**, who moved its adoption. The motion was seconded by Commissioner **Rebeca Sosa** and upon being put to a vote, the vote was as follows:

Bruno A. Barreiro, Chairman **aye**
Barbara J. Jordan, Vice-Chairwoman **absent**

Jose "Pepe" Diaz	**aye**	Audrey M. Edmonson	**aye**
Carlos A. Gimenez	**aye**	Sally A. Heyman	**aye**
Joe A. Martinez	**aye**	Dennis C. Moss	**absent**
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 5th day of February, 2008. 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: **Kay Sullivan**
Deputy Clerk

Approved by County Attorney as
to form and legal sufficiency.

Monica Rizo

#916-PARK

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:

Delores Green
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.

1. Full legal name of the requesting organization: WOMEN WITH A PURPOSE, 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.):
SHUNDA BROWN P O BOX 970-413 MIAMI FL 33197
786-348-5223 801-841-5223 (FAX) WWAPINC@yahoo.com

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

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries):
PRAISE IN THE PARK FESTIVAL & Community HEALTH FAIR
SATURDAY, NOV 17 2007
TO PROVIDE GOOD OLD FASHION community spirit by offering exciting outdoor rides, food, games + live entertainment. Also A FULL HEALTH FAIR

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

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MOSS

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

7. Physical address of event venues (please specify Commission District(s)): GOULDS PARK 11350 SW 216 STREET

8. Description of regional or local impact:

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

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.

Shunda T. Brown
Signature of Authorized Representative

11/15/07
Date

State of Florida

Department of State

I certify from the records of this office that WOMEN WITH A PURPOSE, INC. is a corporation organized under the laws of the State of Florida, filed on May 10, 2001.

The document number of this corporation is N01000003300.

I further certify that said corporation has paid all fees due this office through December 31, 2007, that its most recent annual report/uniform business report was filed on September 4, 2007, and its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the
Great Seal of the State of Florida
at Tallahassee, the Capitol, this the
Fifth day of September, 2007

Kurt S. Browning
Secretary of State

Praise in the Park Festival & Community Health Fair

Sponsored by: *Women With A Purpose, Inc.*

DATE: Saturday, November 17, 2007

TIME: 10:00am – 2:00pm

PLACE: Goulds Park
11350 SW 216 Street
Miami, FL 33170

PLEASE JOIN US FOR A DAY OF CARNIVAL GAMES FOR THE KIDS, LIVE GOSPEL ENTERTAINMENT, HEALTH SCREENINGS, DELICIOUS FOOD ITEMS, AND PRIZES FOR THE ENTIRE FAMILY.

Recieved today @ 10:50 Am 11/14/07

— old Fax

MIAMI- DADE PARKS & RECREATION DEPARTMENT
SHOWMOBILE, STAGES, BLEACHERS, SOUTH & PRODUCTION
305-257-0933 EXT: 240/305-257-1083 (F)

EQUIPMENT CONFIRMATION FORM

ORGANIZATION/AGENCY: OFFICE OF COMMISSIONER DENNIS C. MOSS, VICE-CHAIRMAN

not available

EQUIPMENT REQUESTED: Large Showmobile w/ Stand + 1 Set of Bleachers

NAME OF PERSON RESPONSIBLE FOR THIS BILL: DENNIS C. MOSS

BILLING ADDRESS/ ZIP CODE: 111 N.W. 1st STREET, SUITE 320, MIAMI, FLORIDA 33128

NAME/TITLE OF THE EVENT: Praise in the Park Festival and Fair — Women w/a Purpose

ADDRESS OF EVENT: 11305 S.W. 216 Street (Quarry Road) Goulds Park

TODAY'S DATE _____

DATE (S) OF EVENT: November 17, 2007

SET-UP TIME & DAY: 8 Am, Nov 17, 2007

TAKE-DOWN & DAY: 4 pm, Nov 17, 2007

CONTACT PERSON/PHONE: Shanda Brown 786-348-5223

AT SITE CONTACT/CELL PHONE #: " "

SPECIAL INSTRUCTIONS: Direction item(s) are to be placed, maps, diagrams, etc.

Please contact organization for special instructions.

OTHER INFORMATION: Include additional equipment if needed.

Please see attached request letter

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 outlined in the rental policy. We also understand that the total fee is to be remitted (if) five working days before the event.

*Fee $916.00 Signature [signature]
*(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.

✓ In-Kind ____ Budget Allocation

DATE 11/14/07
SIGNED [signature]

FAXED 11/14/07

NO. ITEMS AVAILABLE EXCEPT BLEACHER

NOV-09-2007 [illegible] TO:3052571083 P.1/2

WWAPince4Anoo.com 9

Detail by Entity Name

Florida Non Profit Corporation

WOMEN WITH A PURPOSE, INC.

Filing Information

Document Number	N01000003300
FEI Number	020545392
Date Filed	05/10/2001
State	FL
Status	ACTIVE
Last Event	CANCEL ADM DISS/REV
Event Date Filed	11/24/2003
Event Effective Date	NONE

Principal Address

16803 SW 107 PLACE
MIAMI FL 33157

Changed 09/04/2007

Mailing Address

P O BOX 970413
MIAMI FL 33197

Changed 08/15/2006

Registered Agent Name & Address

BROWN, SHUNDA T
16803 SW 107 PLACE
MIAMI FL 33157 US

Address Changed: 08/15/2006

Officer/Director Detail

Name & Address

Title PD

BROWN, SHUNDA T
16803 SW 107 PLACE
MIAMI FL 33157

Title VP

DARLING, KELVINA
9400 SW 222 LANE

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MIAMI FL 33189

Title SD

SMITH, MARJORIE
10021 MARTINIQUE DR
MIAMI FL 33189

Annual Reports

Report Year	Filed Date
2005	06/03/2005
2006	08/15/2006
2007	09/04/2007

Document Images

09/04/2007 -- ANNUAL REPORT	View image in PDF format
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05/10/2001 -- Domestic Non-Profit	View image in PDF format

Note: This is not official record. See documents if question or conflict.

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Memorandum

MIAMI-DADE COUNTY

Date: February 5, 2008

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

From: George M. Burgess
County Manager

Subject: District Specific In-Kind Reserve Request Recommendation

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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

A retroactive fee waiver for in-kind services is being requested by a not-for-profit organization Women With A Purpose, Inc. for the Praise in the Park Festival & Community Health Fair event scheduled for November 17, 2007.

In-kind services have been requested in an amount not to exceed $916 from the Miami-Dade Park and Recreation Department for a set of bleachers. This event will be funded from the District 9 in-kind reserve fund.

In FY 2007-08, Women With a Purpose, Inc. has received $2,000 from District 9 discretionary reserve.

Inkind3008