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

MEMORANDUM

Agenda Item No. 11(A)(22)

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

DATE: March 4, 2008

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

SUBJECT: Resolution retroactively authorizing in-kind services for the Walk Now Autism Event

Resolution No. R-259-08

The accompanying resolution was prepared and placed on the agenda at the request of Commissioner Carlos A. Gimenez.

R. A. Cuevas, Jr.
County Attorney

RAC/up

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MEMORANDUM

(Revised)

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

DATE: March 4, 2008

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

SUBJECT: Agenda Item No. 11(A)(22)

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)(22)
03-04-08

RESOLUTION NO. **R-259-08**

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT, THE MIAMI-DADE FIRE RESCUE DEPARTMENT AND THE MIAMI-DADE POLICE DEPARTMENT FOR THE FEBRUARY 10, 2008 WALK NOW FOR AUTISM EVENT SPONSORED BY AUTISM SPEAKS, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED $23,345.00 TO BE FUNDED IN PART FROM THE COUNTYWIDE IN-KIND RESERVE FUND AND IN PART FROM THE NON-AD VALOREM PORTION OF THE FIRE RESCUE DISTRICT IN-KIND RESERVE FUND

WHEREAS, Autism Speaks, Inc. has requested in-kind services from the Miami-Dade Park and Recreation Department, the Miami-Dade Police Department and the Miami-Dade Fire Rescue Department for the February 10, 2008 Walk Now For Autism event in an amount not to exceed $23,345.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the Walk Now For Autism event is a family friendly, non-competitive walk and resource fair with the purpose of raising autism awareness and raising funds to benefit autism research efforts and family services; and

WHEREAS, Autism Speaks, Inc. is a not-for-profit organization; and

WHEREAS, the Walk Now For Autism event is a major event, as that term is defined on the attached Fee Waiver/In-kind Service Application, and $22,770.00 of the in-kind services shall be funded from the Countywide In-kind Reserve Fund, $575.00 of the in-kind services shall be funded from the non-ad valorem portion of the Fire Rescue District 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, the Miami-

Dade Police Department, and the Miami-Dade Fire Rescue Department for the February 10, 2008 Walk Now For Autism event in an amount not to exceed $23,345.00 to be funded in part from the Countywide In-kind Reserve Fund and in part from the non-ad valorem portion of the Fire Rescue District In-kind Reserve Fund.

The foregoing resolution was sponsored by Commissioner Carlos A. Gimenez and offered by Commissioner **Joe A. Martinez**, who moved its adoption. The motion was seconded by Commissioner **Sally A. Heyman** 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	**aye**
Carlos A. Gimenez	**aye**	Sally A. Heyman	**aye**
Joe A. Martinez	**aye**	Dennis C. Moss	**aye**
Dorrin D. Rolle	**aye**	Natacha Seijas	**aye**
Katy Sorenson	**absent**	Rebeca Sosa	**aye**
Sen. Javier D. Souto	**aye**		

The Chairperson thereupon declared the resolution duly passed and adopted this 4th day of March, 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. MR

Monica Rizo

PARK #20,389
Fire #
Police #

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: Autism Speaks, Inc (a)
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.): _____
   Jaclyn Merens, South FL Regional Director, AutismSpeaks
   2151 Hillsboro Blvd #303, DeerfieldBeach, FL 33442
   PH-800-610-6227, FAX 954 421-1054, EMAIL - jmerens@autismspeaks.org
4. Specify fee waiver or in-kind service requested (quantify, if applicable): _____
   ShowMobile, Wireless mic, sound system - $ 4781 ✓
   Parking fees for 2500 cars @ $5 per = $12,500 ✓
   Park fees - Area fee - $2805 ✓ Maintance Fee - $ 302.74 ✓
   Police (6 officers), EMS truck with 2 workers

1 of 8

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GIMENEZ

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): Autism Speaks Walk Now for Autism
Sunday, Feb. 10, 2008 Crandon Park on Key Biscayne
Walk Now For Autism is a family friendly, non-competive walk + resource fair providing information to the autism community + community at large. It is a family friendly, fun filled event with kid's activities, music, + local resources. The event is dedicated to raising autim awareness, advocacy efforts + funds for research + family services

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)): District 7
Crandon Park, 4000 Crandon Blvd, Miami FL

8. Description of regional or local impact: This event will raise awareness through out Miami-Dade about autism, provide resources to families. It provides an opportunity for families living with autism to enjoy a day of fun + information where they are accepted + not judged

9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable):
Set up Sat. Feb 9, 2008 after 2pm + Sunday Feb 10 from 6-8:30AM. Registration begins @ 8:30 AM, Walk + festivities 10-1 PM, Clean up completed by 4:30pm

2008

MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION
Page 3

10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): See Attached - Exhibit A

11. Expected number of participants and estimated attendance (per day, if applicable): 6000

12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): See Attached - Exhibit B

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

Jaclyn Merens
Signature of Authorized Representative

12/20/07
Date

MIAMI DADE WALK AUTISM SPEAKS 2008

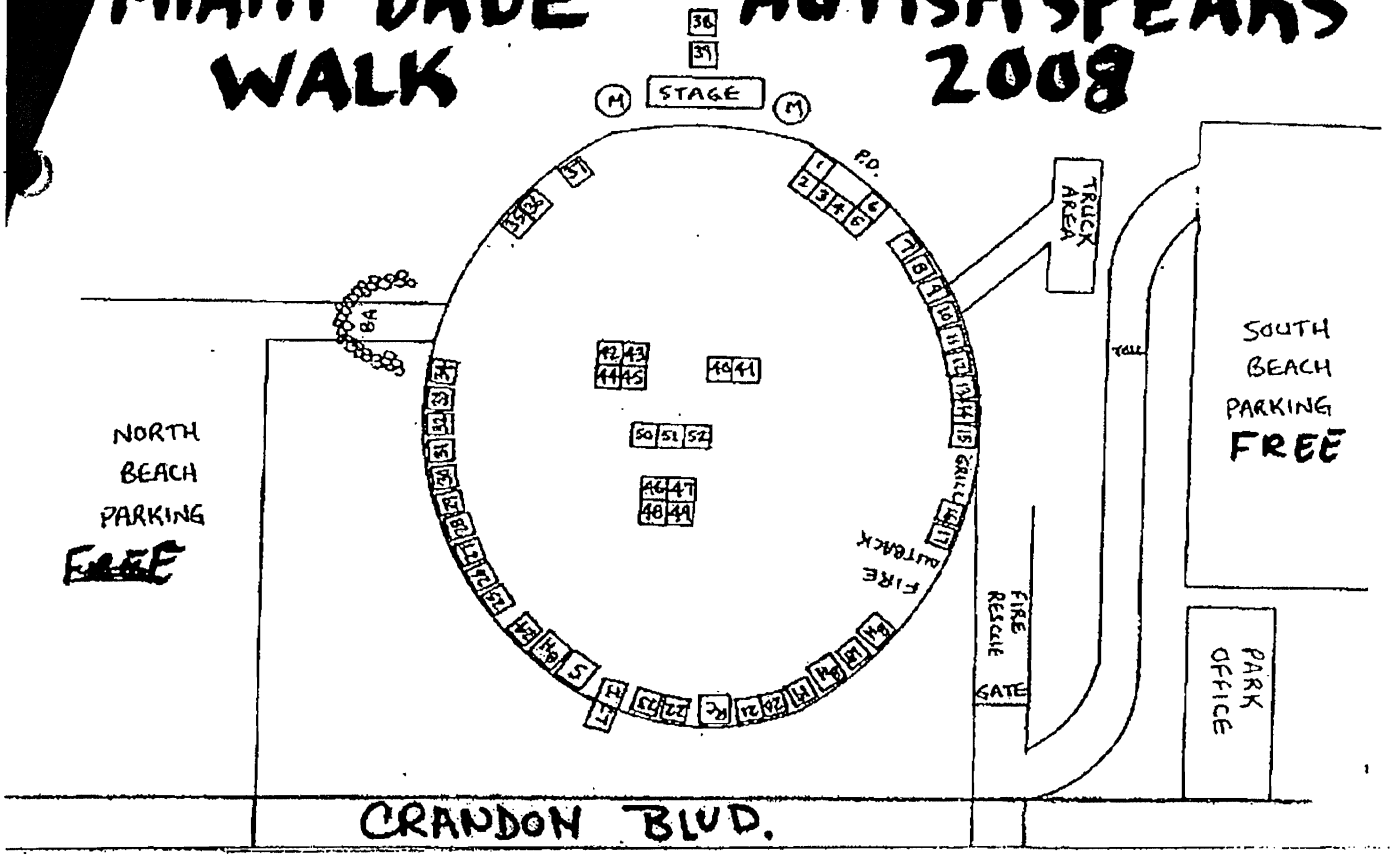

Exhibit A

4008

Exhibit B

SPECIAL EVENT BUDGET

[illegible] fully the intended use, type of business and scope of operation:

DETAILED REVENUE

Source	Price	Total Amount of Income
Family + Corp Sponsorships		$100,000
Donations Collected by Walkers		400,000
	Total Revenue:	500,000

DETAILED EXPENDITURES

Item	Total Amount of Expense
Walk Day Rentals	10,000
Kick Off Events	8,000
Printing	8,500
Mailing	3,000
Misc.	5,000
Total Expenses:	34,500
Net Income Expected:	465,500

DETAILED IN KIND SERVICES

Item	Value of Contribution
Food, Entertainment, Children's Activities	12,500
PSA's + advertising	5,000
Radio, Print media	50,000
Total Value:	$67,500

Describe the intended use of net income generated from this special event: Autism Research, advocacy + awareness

0

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Detail by Entity Name

Foreign Non Profit Corporation

AUTISM SPEAKS INC.

Filing Information

Document Number	F06000006102
FEI Number	N/A
Date Filed	09/22/2006
State	DE
Status	ACTIVE

Principal Address

2 PARK AVENUE 11TH FL
NEW YORK NY 10016

Mailing Address

2 PARK AVENUE 11TH FL
NEW YORK NY 10016

Registered Agent Name & Address

NATIONAL CORPORATE RESEARCH, LTD.
515 E PARK AVE
TALLAHASSEE FL 32301 US

Officer/Director Detail

Name & Address

Title C

WRIGHT, ROBERT C
30 ROCKEFELLER PLAZA 52ND FLOOR
NEW YORK NY 10112

Title VC

WRIGHT, SUZANNE
610 FIFTH AVE SUITE 604
NEW YORK NY 10020

Title P

ROITHMAYR, MARK
2 PARK AVENUE 11TH FL
NEW YORK NY 10016

Title ST

6088

GEIER, PHILIP
70 E 55TH STREET 15TH FLOOR

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: MAR 21 2005

AUTISM SPEAKS INC
C/O PETER F OLBERG
MANATT PHELPS & PHILLIPS LLP
7 TIMES SQUARE
NEW YORK, NY 10036-0000

Employer Identification Number:
20-2329938
DLN:
17053049011005
Contact Person:
JOHN J KOESTER ID# 31364
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
DECEMBER 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
YES
Effective Date of Exemption:
FEBRUARY 11, 2005
Contribution Deductibility:
YES
Advance Ruling Ending Date:
DECEMBER 31, 2009

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. During your advance ruling period, you will be treated as a public charity. Your advance ruling period begins with the effective date of your exemption and ends with advance ruling ending date shown in the heading of the letter.

Shortly before the end of your advance ruling period, we will send you Form 8734, Support Schedule for Advance Ruling Period. You will have 90 days after the end of your advance ruling period to return the completed form. We will then notify you, in writing, about your public charity status.

Please see enclosed Information for Exempt Organizations Under Section 501(c)(3) for some helpful information about your responsibilities as an exempt organization.

If you distribute funds to other organizations, your records must show whether they are exempt under section 501(c)(3). In cases where the recipient organization is not exempt under section 501(c)(3), you must have evidence the funds will be used for section 501(c)(3) purposes.

Letter 1045 (DO/CG)

7088

AUTISM SPEAKS INC

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

Lois G. Lerner
Director, Exempt Organizations
Rulings and Agreements

Enclosures: Information for Organizations Exempt Under Section 501(c)(3)

Letter 1045 (DO/CG)

8088

MIAMI-DADE PARKS

SHOWMOBILES, STAGES, BLEACHERS, AND SOUND PRODUCTION

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: Autism Speaks, Inc

EQUIPMENT REQUESTED: New Large Showmobile, Large Sound Syst

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Jaclyn Merens But County Commission Resolution traditionally covers this

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

BILLING ADDRESS/ ZIP CODE: Autism Speaks Inc
2157 W. Hillsboro Blvd. #303 Deerfield Bch, FL 33442

NAME/TITLE OF THE EVENT: Walk Now for Autism

ADDRESS OF EVENT: Crandon Park on Key Biscayne

TODAY'S DATE: 11/8/07 DATE (S) & TIME OF EVENT: Sunday, Feb 10, 2008 6 Am 9 Am

SET-UP TIME & DAY: Sat 2/9/08 @ 2pm

TAKE-DOWN & DAY: Sun, 2/10/08 4pm

CONTACT PERSON/PHONE: Jaclyn Merens or Roy Kelly
AT SITE CONTACT/CELL PHONE #: 561 212 2935 | 305 301-5010
JACK Patterson - 305-962-6534

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

OTHER INFORMATION: Include additional equipment if needed.
The US Olympic trials are at the Park on Sat 2/9/08 & will also be using # Showmobile Can we use the same one

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 TBD
*(SEE FEE SCHEDULE FOR EXACT CHARGES)
$ 4,781.00

Signature Jaclyn Merens
Agency/Group Autism Speaks

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.

Delivery wire lie @ 6 Am Sunday Feb 10, 2008. Tzia-Lowe @ 4 pm Feb 10, 2008.

FAXED 11/9/07

CONFIRMED DATE 11/9/07 DISBAT

DATE 11/15/07

FAXED 11/15/07

Follow up with Deloris Green (Re: if Resolution is submitted)
305 375 5143

Green, Delores (OSBM)

From: Jackie Merens [jmerens@autismspeaks.org]
Sent: Thursday, December 20, 2007 2:18 PM
To: Green, Delores (OSBM)
Subject: FW: Autism Speaks Park fees
Attachments: 08 Showmobile confirmation Request.pdf

Jaclyn Merens
South Florida Regional Director
Autism Speaks, Inc
2151 West Hillsboro Blvd., Suite 303
Deerfield Beach, FL 33442
954-421-9997
800-610-6227
Fax: 954-421-1054
E-mail jmerens@autismspeaks.org
Web: www.autismspeaks.org

Register today for 2008 Walk Now for Autism Events:

Miami-Dade - Sunday, Feb. 10, 2008 www.walknowforautism.org/miami

Palm Beach County - Sunday, March 2, 2008
www.walknowforautism.org/palmbeach

Broward County - Saturday, April 12, 2008
www.walknowforautism.org/broward

AUTISM SPEAKS

From: McCaffrey, Michael (MDPR) [mailto:MIKEM@miamidade.gov]
Sent: Saturday, December 08, 2007 10:28 AM
To: Jackie Merens
Cc: Aleman, Jorge (MDPR)
Subject: fees

The fees for your event : Area Fee-$2,805. which is $935.per 2000 people. Facility maintenance for two Park Service Aides is $302.74.

Parking is $5.00 per car-$10,000 for 2000 cars. Alan is going to work with you on the security/clean-up deposit. That fee would not be requested for your in-kind as it is refundable. I'll be back in the office on Tuesday.

Mike

Michael McCaffrey, Park Manager 2
Crandon Park
4000 Crandon Blvd.
Key Biscayne, Fl. 33149
(305)361-5421

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Date: March 4, 2008

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

From: George M. Burgess
County Manager

Subject: Countywide In-Kind Reserve Request Recommendation

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 countywide in-kind reserve balance allows for the funding of this request.

Background

A retroactive waiver for in-kind services is being requested by a not-for-profit organization Autism Speaks, Inc. for the annual Walk Now for Autism event held on February 10, 2008.

In-kind services have been requested in an amount not to exceed $20,389 from the Miami-Dade Park and Recreation Department for the use of a large show mobile, 20kw generator, a sound technician, large sound system, parking fees and use of the Crandon Park facility, $2,381 from the Miami-Dade Police Department for police services and $575 from the Miami-Dade Fire Rescue Department for personnel services for a total in-kind amount of $23,345. This event will be funded in part from the countywide in-kind reserve fund and in part from the non-ad valorem in-kind reserve of the fire rescue district budget.

In FY 2007-08, Autism Speaks, Inc. has received no County funding for this event.

Inkind4608