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

MEMORANDUM

Agenda Item No. 11(A)(42)

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

DATE: October 7, 2008

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

SUBJECT: Resolution authorizing in-kind services for the September 27, 2008 "Feria de Salud: Por tu Familia" event

Resolution R-1095-08

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Senator Javier D. Souto.

R. A. Cuevas, Jr.
County Attorney

RAC/up

MEMORANDUM

(Revised)

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

DATE: October 7, 2008

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

SUBJECT: Agenda Item No. 11(A)(42)

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)(42)
10-7-08

RESOLUTION NO. R-1095-08

RESOLUTION AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT FOR THE SEPTEMBER 27, 2008 "FERIA DE SALUD: POR TU FAMILIA" EVENT SPONSORED BY THE AMERICAN DIABETES ASSOCIATION, INC. A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED $3,526.00 TO BE FUNDED FROM THE DISTRICT 10 IN-KIND RESERVE FUND

WHEREAS, the American Diabetes Association, Inc. has requested in-kind services from the Miami-Dade Park and Recreation Department for the September 27, 2008 "Feria de Salud: Por tu Familia" event in an amount not to exceed $3,526.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the "Feria de Salud: Por tu Familia" event provides free health screenings and education to the Hispanic community about early diabetes detection and treatment; and

WHEREAS, the American Diabetes Association, Inc. is a not-for-profit organization; and

WHEREAS, the "Feria de Salud: Por tu Familia" is a district event, as that term is defined on the attached Fee Waiver/In-kind Service Application, and $3,526.00 of the in-kind services shall be funded from the District 10 In-kind Reserve Fund,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board authorizes in-kind services from the Miami-Dade Park and Recreation Department for the September 27, 2008

"Feria de Salud: Por tu Familia" in an amount not to exceed $3,526.00 to be funded from the District 10 In-kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Senator Javier D. Souto. It was offered by Commissioner **Rebeca Sosa**, who moved its adoption. The motion was seconded by Commissioner **Jose "Pepe" Diaz** 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	**absent**
Katy Sorenson	**aye**	Rebeca Sosa	**aye**
Sen. Javier D. Souto	**absent**		

The Chairperson thereupon declared the resolution duly passed and adopted this 7th day of October, 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. GKS

Gerald K. Sanchez

D

Park $ ~~1406~~
Tim $ 3526

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

9/27

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):

Per Bernardo conversation w/Amanda 7/1/08 3:41pm

- [x] 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: American Diabetes Association

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

- [x] 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.):

Beatriz Gomez / Belikys Castillo
8405 NW 53rd St. Suite A-101
Miami, FL 33166 305.477.8999 x3098 / x3118

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

Tropical Park Fees:
Large Snowmobile $2566.00 / Parking Lot $-120.00 / vendor Fee $1600.00

Page 1 of 3
Revised: 6/4/07

JUN-25-2008 10:34 From:SENATOR SOUTO 3052222120 To:3055943029 P.3/5

10
~ Souto

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

Feria de Salud: Por Tu Familia - Sept. 27, 2008
Free festive event dedicated to the world of diabetes - targeting the Hispanic community. Providing free health screenings & education. Goal is to reach Hispanics & teach/educate them on the value of early detection & agressive treatment.

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)):

Tropical Park 7900 SW 40th St. Miami, FL

8. Description of regional or local impact. Targeting the Hispanic community. Goal is to increase awareness of the seriousness of diabetes at every level: local/regional, etc...

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

Event times: 10-5 pm (9/27/08
Set up: 9/26 & 9/27
Breakdown: 9/27

10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): see attached map

11 Expected number of participants and estimated attendance (per day, if applicable): only one day, 9/27, approximately 2500-3000

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

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

Signature of Authorized Representative

7/30/2008
Date

Detail by Entity Name

Foreign Non Profit Corporation

AMERICAN DIABETES ASSOCIATION, INC.

Filing Information

Document Number	F98000001168
FEI Number	131623888
Date Filed	02/27/1998
State	OH
Status	ACTIVE

Principal Address

1701 N BEAUREGARD
ALEXANDRIA VA 22311

Changed 02/22/2000

Mailing Address

1701 N BEAUREGARD
ALEXANDRIA VA 22311

Changed 02/22/2000

Registered Agent Name & Address

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324 US

Officer/Director Detail

Name & Address

Title CH

PERRY, R. STEWART
1701 N BEAUREGARD ST
ALEXANDRIA VA 22311

Title PM&S

BUSE, JOHN B MD, PHD
1701 N BEAUREGARD ST
ALEXANDRIA VA 22311

Title PHCE

ALBRIGHT, ANN L PHD, RD

8

1701 N BEAUREGARD ST
A;EXANDRIA VA 22311

Title S/T

GARRETT, ROBERT C FACHE
1701 N BEAUREGARD ST
ALEXANDRIA VA 22311

Title CEO

HAUSNER, LARRY
1701 N BEAUREGARD ST
ALEXANDRIA VA 22311

Annual Reports

Report Year	Filed Date
2006	04/28/2006
2007	04/05/2007
2008	05/26/2008

Document Images

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02/22/2000 -- ANNUAL REPORT	View image in PDF format
03/06/1999 -- ANNUAL REPORT	View image in PDF format
02/27/1998 -- Foreign Profit	View image in PDF format

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

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No Events **No Name History**

Entity Name Search

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Internal Revenue Service

Date: September 21, 2007

AMERICAN DIABETES ASSOCIATION INC
NATIONAL OFFICE
1701 N BEAUREGARD STREET
ALEXANDRIA VA 22311-1742

Department of the Treasury
P. O. Box 2508
Cincinnati, OH 45201

Person to Contact:
Ms. Epling 17-07082
Customer Service Representative
Toll Free Telephone Number:
877-829-5500
Federal Identification Number:
13-1623888
Group Exemption Number:
9328

Dear Sir or Madam:

This is in response to your request of September 21, 2007 regarding a copy of your organization's group exemption letter.

In August 1982 we issued a determination letter that recognized your organization as exempt from federal income tax. Our records indicate that your organization is currently exempt under section 501(c)(3) of the Internal Revenue Code.

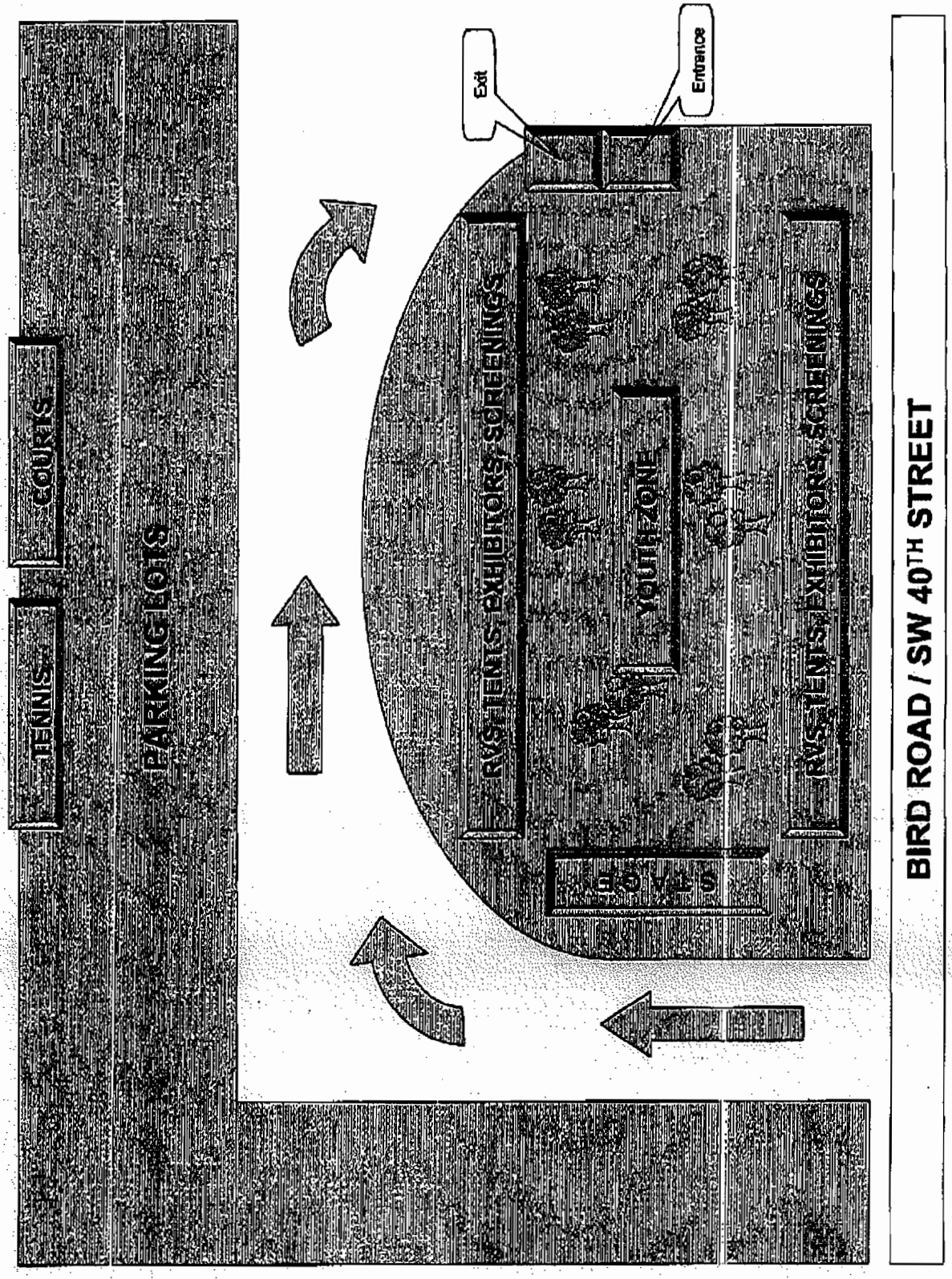
Based on the information supplied, we also recognized the subordinates named on the list your organization submitted as exempt from Federal income tax under 501(c)(15) of the Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely,

Michele M. Sullivan

Michele M. Sullivan, Oper. Mgr.
Accounts Management Operations 1


TENNIS
COURTS
PARKING LOTS
RV'S, TENTS, EXHIBITORS, SCREENINGS
YOUTH ZONE
RV'S, TENTS, EXHIBITORS, SCREENINGS
STAGE
Exit
Entrance
BIRD ROAD / SW 40TH STREET

		Project Budget 2008		
		[redacted]		
		Organization Name: American Diabetes Association		
		Project Title: Feria de Salud - Por Tu Familia		
		[redacted]		
		[redacted]		
A.		**Personnel Costs**		
		Key Staff Salaries:[1]	$65,000	
		Key Staff Benefits:[1]	$5,000	
		Consultant Fees:	$0	
		[redacted]		
B.		**Operating Costs**		
		Facilities:	$7,000	Site rental fees; Janitorial fees; City of Miami Police Department fees; Parking fees; Street closure fees (city).
		Equipment:	$12,000	Tents (10x10, 20x20, 30x30, 40x40); Air-conditioned tent for on-site screenings; Generators; Lights; Staging; Tables; Chairs; Port-a-potties; Truck rental for day-of transportation; Refrigerated truck for perishables; A/V Costs, etc.
		Office Supplies:	$3,500	Prior to event: postage, name badges, name badge inserts, storage bins/boxes, printing paper, etc. Supplies needed the day of: pens, pencils, paper, staples, staplers, clip boards, scissors, rubber bands, paper clips.

		Printing and Publication:	$4,750	Promotional Save the Date Piece; Actual Feria mailer; Diabetes brochures (minimum 20 brochures, 2,500 of each); Promotional material for each corresponding module (maracas for Everybody Dance/Move, measuring cup & apron for Health & Flavor in the Kitchen, etc.); Feria de Salud t-shirts for participants, committee members, volunteers & staff; Day of Schedule of Events; Day of passport for participants to use at each booth; Evaluations; Signage (banners & signs)
		Travel and Transportation:	$2,500	Travel / transportation cost for staff; travel costs for emcees, speakers, volunteers and committee members.
		Event & Meeting Expenses:	$2,500	Meeting expenses: replication of packets for volunteers and committee members; food and refreshments; volunteer recognition awards.
		Other:	$0	
		[illegible]	[illegible]	
C.		**Indirect Costs**[2]		
			$0	
D.		**Total Project Cost**		
		[illegible]	[illegible]	

July 1, 2008

MS. Delores Green
305.375.5168
RE: American Diabetes Association – Feria de Salud: Por Tu Familia
CC: Andre Naumann, Office of Senator Javier Souto, Commissioner

Dear Ms. Green

Per Andre Naumann at the office of Commissioner Javier Souto, I am enclosing the following Fee Waiver/In-Kind Services Application for our Feria de Salud: Por Tu Familia which is being held on Saturday, September, 27, 2008 at Tropical Park from 10am to 5pm.

I have been working closely with Andre and with Mercy Morgan at Tropical Park. The event has been placed on the agenda and Commissioner Souto is helping us by waiving the park / event fees. Andre had wanted me to fill this form out and send it to your attention – as the large showmobile has been reserved for the event. The cost for that has also been waived through Commissioner Souto's office.

We just wanted to make sure everyone is in the loop.

Should you have any questions, please feel free to contact me or Belkys at 305.477.8999 x3098 or x3118 or via email at bgomez@diabetes.org / bcastillo@diabetes.org.
Thank you in advance for your help!

Best Regards,

Beatriz Gomez
Program Director
Southeast Florida
American Diabetes Association

Miami Office
8405 NW 53rd Street, Suite A-101
Miami, FL 33166
305.477.8999

Diabetes Information
1-800-DIABETES (1-800-342-2383)
www.diabetes.org

The Mission of the American Diabetes Association is to prevent and cure diabetes and to improve the lives of all people affected by diabetes.

Green, Delores (OSBM)

From: Showmobile (MDPR)
Sent: Wednesday, July 02, 2008 7:59 AM
To: Green, Delores (OSBM)
Subject: RE: American Diabetes Association

The Medium Showmobile is $1,156 and the 20 KW generator is $250. Total for both items is $1,406.

From: Green, Delores (OSBM)
Sent: Tuesday, July 01, 2008 4:02 PM
To: Byrnes, Timothy (MDPR); Showmobile (MDPR)
Cc: Gonzalez, Ana (MDPR)
Subject: American Diabetes Association

Hi Tim/Pete:

Please provide a cost estimate for the attached in-kind for American Diabetes Assoc, which is being sponsored by Senator Souto. Thanks!

15

Green, Delores (OSBM)

From: Byrnes, Timothy (MDPR)
Sent: Wednesday, July 09, 2008 8:44 PM
To: Green, Delores (OSBM)
Cc: Morgan, Tom (MDPR); Morgan, Mercy (MDPR); Showmobile (MDPR)
Subject: RE: American Diabetes Association

)elores, sorry for not responding to you quicker on this matter, the In-Kind Cost for the aforementioned event that is scheduled to ake place at Tropical Park on September 27th in the front parking directly off of Bird Road is as follows:

⇒	Medium Showmobile	$1,156.00
⇒	20KW Generator	$ 250.00
⇒	Parking Lot	$ 720.00
⇒	Vendor Fee based of 35 vendors	$1,400.00
⇒	Total	$3,526.00

Trusting if you have additional questions, please feel free to contact me
Tim

Tim Byrnes, Tropical Park/Trail Glades Range/Showmoible Service Area Manager
Miami-Dade County Park and Recreation Department
Tropical Park 7900 SW 40th Street, Miami, FL 33155
305-226-8315 Phone, 305-553-8511 Fax
www.miamidade.gov/parks
Delivering Excellence Every Day"

From: Green, Delores (OSBM)
Sent: Monday, July 07, 2008 11:34 AM
To: Byrnes, Timothy (MDPR)
Cc: Gonzalez, Ana (MDPR)
Subject: American Diabetes Association

Tim,
)o you have the cost for this in-kind?

From: Green, Delores (OSBM)
Sent: Tuesday, July 01, 2008 4:02 PM
To: Byrnes, Timothy (MDPR); Showmobile (MDPR)
Cc: Gonzalez, Ana (MDPR)
Subject: American Diabetes Association

Hi Tim/Pete:

Please provide a cost estimate for the attached in-kind for American Diabetes Assoc, which is being sponsored by Senator Souto.
Thanks!

Memorandum

MIAMI-DADE COUNTY

Date: October 7, 2008

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

From: George M. Burgess
County Manager

Subject: District Specific In-Kind 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

A retroactive waiver for in-kind services has been requested by a not-for-profit organization the American Diabetes Association, Inc. for the Feria de Salud: Por tu Familia event scheduled for September 27, 2008.

In-kind services have been requested in an amount not to exceed $3,526 from the Miami-Dade Park and Recreation Department for the use of the Tropical Park facility to include parking spaces, 20KW generator, vendor fee, and one (1) show mobile. This event will be funded from the District 10 in-kind reserve fund.

In FY 2007-08, the American Diabetes Association, Inc. has received $1,000 from District 3 discretionary reserve, $2,500 from District 6 discretionary reserve, and $2,500 from District 13 office funds.

Inkind13508