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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: November 20, 2008

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

SUBJECT: Resolution retroactively authorizing in-kind services for the September 21, 2008 "20th Anniversary Cuban Exodus Relief Project"

Resolution No. R-1260-08

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/cp

RESO\2078

MEMORANDUM

(Revised)

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

DATE: November 20, 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)
11-20-08

RESOLUTION NO. **R-1260-08**

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT AND THE MIAMI-DADE POLICE DEPARTMENT FOR THE SEPTEMBER 21, 2008 "20th ANNIVERSARY CUBAN EXODUS RELIEF PROJECT" SPONSORED BY FOUNDATION FOR HUMAN RIGHTS IN CUBA, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED $5,215.00 TO BE FUNDED FROM THE DISTRICT 10 IN-KIND RESERVE FUND

WHEREAS, the Foundation for Human Rights in Cuba, Inc. has requested in-kind services from the Miami-Dade Park and Recreation Department and the Miami-Dade Police Department, for the September 21, 2008 "20th Anniversary Cuban Exodus Relief Project" event in an amount not to exceed $5,215.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the purpose of the "20th Anniversary Cuban Exodus Relief Project" event is to commemorate the 20th anniversary of the Cuban Exodus Relief Fund and the birth date of Jorge Mas Canosa; and

WHEREAS, the Foundation for Human Rights in Cuba, Inc. is a not-for-profit organization; and

WHEREAS, the "20th Anniversary Cuban Exodus Relief Project" event is a small event, as that term is defined on the attached Fee Waiver/In-kind Service Application and $5,215.00 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 retroactively authorizes in-kind services from the Miami-Dade Park and Recreation Department and the

Miami-Dade Police Department for the September 21, 2008 "20th Anniversary Cuban Exodus Relief Project" event in an amount not to exceed $5,215.00 to be funded from the District10 In-kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Javier D. Souto. This resolution was offered by Commissioner **Barbara J. Jordan**, 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	**aye**
Katy Sorenson	**aye**	Rebeca Sosa	**aye**
Sen. Javier D. Souto	**aye**		

The Chairperson thereupon declared the resolution duly passed and adopted this 20th day of November, 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

Pres – 4,182.00

Police – 1,033

$5215.

9/21

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: Foundation for Human Rights in Cuba

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.): (305) 592-7768 (P)
   Alex Dominguez (305) 592-7789 (F)
   1312 SW 27th Avenue, 3rd floor adominguez@cnf.org
   Miami, FL 33145

4. Specify fee waiver or in-kind service requested (quantify, if applicable):
   Fee waiver: $5,000 approximately

   In-kind service: Police coverage for the event

Santo

(10)

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): September 21st

Cuban Exodus Relief Project 20th Anniversary
relief

Festival style event with live performances, food, and activities for children. Event will commemorate the 20th Anniversary of the Cuban Exodus Relief Fund (see one page history) and the birth date of Jorge Mas Canosa

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)): Javier Souto, Commission District 10 – Tropical Park Equestrian Center 7900 SW 40th Street

8. Description of regional or local impact:

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

09/03/2008 16:33 3055927889 CANF 9 PAGE 03/05

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.

Signature of Authorized Representative

8/28/08
Date

09/03/2008 16:33 3055927889 CANF 7 PAGE 04/05

Cuban Exodus Relief Fund, Inc.

Since 1959, more than 925,000 Cuban refugees have been admitted to the United States, including the 125,000 Cubans who arrived during the Mariel boatlift in 1980. In 1984, the Cuban American National Foundation began providing humanitarian aid in the form of food, shelter, education and medical assistance to Cuban refugees stranded in third countries without legal status and awaiting approval for entry into the United States. Through its **Cuban Exodus Relief Fund** project, **CANF** distributed to these exiles over $4 million raised through direct mailings and various radio and telethons held across the country.

On June 13, 1988, **CANF** signed an historic agreement with the U.S. Department of State and the Immigration and Naturalization Service that allowed up to 1,500 Cubans stranded in third countries to immediately emigrate to the U.S., with an additional 1,500 every year thereafter. The agreement was based on a 1986 Administration decision to permit the private sector to sponsor as many as 4,000 refugees annually -- the Private Sector Initiative (PSI). The PSI Program was unique in that individual sponsors, in coordination with the Foundation, guarantee shelter, employment and medical insurance, as well as other basic necessities in order to ensure that local, state and federal government funds are not used for resettlement.

As of the end of 1991, the Cuban American National Foundation had privately resettled more than 8,600 Cuban refugees at no cost to the Federal Government. These refugees were stranded in third countries such as Panama, Costa Rica and Spain, among many others, after fleeing the totalitarian government of Fidel Castro. In just under three years, **CANF's** model Private Sector Initiative Program has provided an impressive net savings of over $35 million to U.S. taxpayers.

In March 1991, the **Cuban Exodus Relief Fund** was incorporated as an independent, non-profit organization dedicated to processing and assisting in the private resettlement and family reunification of Cuban refugees directly from Cuba and from third countries into the United States. The **Cuban Exodus Relief Fund's** development of a nationwide placement and resettlement services program has its basis in the years of outreach work done by the **CANF** organization and its individual Directors throughout the United States. Individual Directors of the Foundation have had a long-standing humanitarian tradition of assisting Cuban refugees in many Cuban-American communities in the United States. The success of the **CANF** Private Sector Initiative Program has also been due in large part to the goodwill generated and cash in-kind services support provided by these Cuban-American communities. An indicative measure of support has been the active participation by these communities in annual fundraising radio and telethons in Miami, Orlando, Tampa, Newark, New York City, Chicago, Los Angeles, San Francisco, Boston and Houston, among other cities.

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00044

Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

86-8013610805C-1	05/09/2006	05/31/2011	[illegible]
Certificate Number	Effective Date	Expiration Date	Exemption

This certifies that

FOUNDATION FOR HUMAN RIGHTS IN CUBA INC
1312 SW 27TH AVE FL 3
MIAMI FL 33145-1243

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property, r personal property purchased or rented, or services purchased.

Important Information for Exempt Organizations

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt See Rule 12A-1.038, Florida Administrative Code (FAC).

2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organiz customary nonprofit activities.

3. Purchases made by an individual on behalf of the organization are taxable, even if the individual wil reimbursed by the organization.

4. This exemption applies only to purchases your organization makes. The sale or lease to others by y organization of tangible personal property, sleeping accommodations or other real property is taxabl organization must register, and collect and remit sales and use tax on such taxable transactions. N are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070,

5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Und circumstances should this certificate be used for the personal benefit of any individual. Violators will payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a thi felony. Any violation will necessitate the revocation of this certificate.

6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Ce Registration at 850-487-4130. The mailing address is PO BOX 6480, Tallahassee, FL 32314-6480.

Form **W-9**
(Rev. January 2003)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name
Foundation for Human Rights in Cuba

Business name, if different from above

Check appropriate box: ☐ Individual/ Sole proprietor ☐ Corporation ☐ Partnership ☑ Other ▶ 501C3 ☐ Exempt from backup withholding

Address (number, street, and apt. or suite no.)
1312 SW 27th Avenue, 3rd Floor

Requester's name and address (optional)

City, state, and ZIP code
Miami, FL. 331~~85~~ 45

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN). **However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3.** For other entities, it is your employer identification number (EIN). If you do not have a number, see **How to get a TIN** on page 3.

Note: *If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.*

Social security number
| | | | | | | | | |

or

Employer identification number
| 8 | 5 | 0 | 4 | 9 | 4 | 1 | 8 | 7 |

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person ▶ Date ▶ 8/28/08

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee.

Note: *If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.*

Foreign person. If you are a foreign person, use the appropriate Form W-8 (see Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.

2. The treaty article addressing the income.

3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

mal Revenue Service

Department of the Treasury

P. O. Box 2508
Cincinnati, OH 45201

Date: February 1, 2002

Person to Contact:
Richard Owens 31-00913
Customer Service Representat
Toll Free Telephone Number:
8:00 a.m. to 8:30 p.m. EST
877-829-5500
Fax Number:
513-263-3756
Federal Identification Number:
65-0494157

Foundation for Human Rights in Cuba, Inc.
1312 SW 27th Avenue Suite 304
Miami, FL 33145-1243

Dear Sir or Madam:

This letter is in response to your request for a copy of your organization's determination letter. take the place of the copy you requested.

Our records indicate that a determination letter issued in April 1996, granted your organization e from federal income tax under section 501(c)(3) of the Internal Revenue Code. That letter is stil

Based on information subsequently submitted, we classified your organization as one that is not foundation within the meaning of section 509(a) of the Code because it is an organization descr sections 509(a)(1) and 170(b)(1)(A)(vi).

This classification was based on the assumption that your organization's operations would contir in the application. If your organization's sources of support, or its character, method of operatior purposes have changed, please let us know so we can consider the effect of the change on the status and foundation status of your organization.

Your organization is required to file Form 990, Return of Organization Exempt from Income Tax, gross receipts each year are normally more than $25,000. If a return is required, it must be filed day of the fifth month after the end of the organization's annual accounting period. The law impc penalty of $20 a day, up to a maximum of $10,000, when a return is filed late, unless there is rea cause for the delay.

All exempt organizations (unless specifically excluded) are liable for taxes under the Federal Insu Contributions Act (social security taxes) on remuneration of $100 or more paid to each employee calendar year. Your organization is not liable for the tax imposed under the Federal Unemployme (FUTA).

Organizations that are not private foundations are not subject to the excise taxes under Chapter 4 Code. However, these organizations are not automatically exempt from other federal excise taxes

Donors may deduct contributions to your organization as provided in section 170 of the Code. Be legacies, devises, transfers, or gifts to your organization or for its use are deductible for federal es gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Co

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Detail by Entity Name

Florida Non Profit Corporation

FOUNDATION FOR HUMAN RIGHTS IN CUBA, INC.

Filing Information

Document Number	N92000000943
FEI Number	650494157
Date Filed	12/28/1992
State	FL
Status	ACTIVE
Last Event	CANCEL ADM DISS/REV
Event Date Filed	10/06/2005
Event Effective Date	NONE

Principal Address

1312 SW 27TH AVE
STE 304
MIAMI FL 33145

Changed 04/17/2000

Mailing Address

1312 SW 27TH AVE
STE 304
MIAMI FL 33145

Changed 04/17/2000

Registered Agent Name & Address

SANCHEZ-MEDINA, JR, ROLAND
2333 PONCE DE LEON BLVD, SUITE 302
CORAL GABLES FL 33134 US

Name Changed: 04/27/2007

Address Changed: 04/27/2007

Officer/Director Detail

Name & Address

Title PD

COSTA, TONY
1312 SW 27TH AVE, SUITE 304
MIAMI FL 33145

Title VP

DEL VALLE, CLARA MARIA
1312 SW 27TH AVE, SUITE 304
MIAMI FL 33145

Title SCT

DEL VALLE, MARIO
1312 SW 27TH AVE, SUITE 304
MIAMI FL 33145

Title AS

SANCHEZ-MEDINA JR., ROLAND
2333 PONCE DE LEON BLVD, SUITE 302
CORAL GABLES FL 33134

Annual Reports

Report Year	Filed Date
2006	07/13/2006
2007	04/27/2007
2008	03/31/2008

Document Images

03/31/2008 -- ANNUAL REPORT	View image in PDF format
04/27/2007 -- ANNUAL REPORT	View image in PDF format
07/13/2006 -- ANNUAL REPORT	View image in PDF format
10/06/2005 -- REINSTATEMENT	View image in PDF format
02/04/2004 -- ANNUAL REPORT	View image in PDF format
05/06/2003 -- ANNUAL REPORT	View image in PDF format
06/03/2002 -- ANNUAL REPORT	View image in PDF format
01/19/2001 -- ANNUAL REPORT	View image in PDF format
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03/01/1999 -- ANNUAL REPORT	View image in PDF format
01/20/1998 -- ANNUAL REPORT	View image in PDF format
01/22/1997 -- ANNUAL REPORT	View image in PDF format
01/25/1996 -- ANNUAL REPORT	View image in PDF format
03/21/1995 -- ANNUAL REPORT	View image in PDF format

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

Previous on List Next on List Return To List

Rodriguez, Nadia (OSBM)

From: Naumann, Andre (DIST10)
Sent: Wednesday, September 03, 2008 4:58 PM
To: Rodriguez, Nadia (OSBM)
Subject: FW: Equestrian Center Reservation (FYI)

Our office Authorizes the use of in-kind funds for the event held by Fundacion Nacional Cubano Americana"

This Amount for Parks. Police needs to be added. I think it was on the application.

Andre Naumann
Assistant to Commissioner Javier Souto
Miami Dade County
District 10
Office: 305-222-2116
Cell: 305-282-8271
Fax: 305-222-2120
www.javiersouto.com

From: Naumann, Andre (DIST10)
Sent: Thursday, August 28, 2008 5:43 PM
To: Jayska, Amanda (OSBM)
Subject: RE: Equestrian Center Reservation (FYI)

I know you were cc'd on this. Since there were so many, here is the most recent amount. Police needs to be added.

Thanks,

Andre Naumann
Assistant to Commissioner Javier Souto
Miami Dade County
District 10
Office: 305-222-2116
Cell: 305-282-8271
Fax: 305-222-2120
www.javiersouto.com

From: Kirwin, Kevin (MDPR)
Sent: Monday, August 25, 2008 2:56 PM
To: Naumann, Andre (DIST10)
Cc: Jayska, Amanda (OSBM); Gonzalez, Ana (MDPR); Parrado, George (MDPR); Morgan, Tom (MDPR); Byrnes, Timothy (MDPR)
Subject: RE: Equestrian Center Reservation

Andre - as a follow-up to our discussion - please add $331.96 to the total for this event to cover the direct costs associated with cleanup after hours. The new total is $4,181.96

Thank you,

Kevin M. Kirwin
Assistant to the Director
Miami-Dade County, Park and Recreation Department
275 NW 2nd Street, 5th Floor
Miami, FL 33128
Kirwin@miamidade.gov
office 305.755.7912 cell 305.877.4444

"Delivering Excellence Every Day"
"Building a livable community, one green space at a time."
2008 Parks and Open Space System Master Plan

Save a tree. Don't print this e-mail unless it's really necessary.

From: Kirwin, Kevin (MDPR)
Sent: Monday, August 25, 2008 2:01 PM
To: Naumann, Andre (DIST10)
Cc: Jayska, Amanda (OSBM); Gonzalez, Ana (MDPR); Parrado, George (MDPR); Morgan, Tom (MDPR); Byrnes, Timothy (MDPR)
Subject: RE: Equestrian Center Reservation

Andre – FNCA is reserved for September 21, 2008. The cleanup deposit must be backed out of the total below. The amount is $3,850.
Thank you,

Kevin M. Kirwin
Assistant to the Director
Miami-Dade County, Park and Recreation Department
275 NW 2nd Street, 5th Floor
Miami, FL 33128
Kirwin@miamidade.gov
office 305.755.7912 cell 305.877.4444

"Delivering Excellence Every Day"
"Building a livable community, one green space at a time."
2008 Parks and Open Space System Master Plan

Save a tree. Don't print this e-mail unless it's really necessary.

From: Naumann, Andre (DIST10)
Sent: Monday, August 25, 2008 1:30 PM
To: Kirwin, Kevin (MDPR); Faragalli, Frank (MDPR); Gonzalez, Ana (MDPR)
Cc: Jayska, Amanda (OSBM)
Subject: Equestrian Center Reservation

Good Afternoon,

I just wanted to make sure that the Equestrian Center is reserved for the "Fundacion Nacional Cubano Americana" on September 21, 2008 from 12pm - 6pm.

The following are figures that Pablo sent us:

$3500 for the Arena
$300 for Packing
$1000 for Cleanup Deposit

$50 for permit Application

Total of $ 4850

This will be paid using District 10 in-kind funds.

I will double check and get back to you on the exact name of the organization and the name of the event.

Thanks,

Andre Naumann
District 10
Office of Commissioner Javier Souto
305-222-2116
305-282-8271 cell

Rodriguez, Nadia (OSBM)

From: Daker, Richard F. [RDaker@mdpd.com]
Sent: Tuesday, September 09, 2008 10:36 AM
To: Rodriguez, Nadia (OSBM)
Cc: Jayska, Amanda (OSBM); Shaw, Stefanie L. (MDPD)
Subject: Cuban Exodus Relief Project

Good Morning Nadia, The cost for Cuban Exodus Relief Project to be held at Tropical Park on September 21, 2008 is $1,032.62.

Thanks,

Dick Daker

Sergeant R. F. Daker
Miami-Dade Police Department
Special Events Unit
1519 NW 79 Avenue
Miami, Fl 33126
Office: 305-468-1210
Fax: 305-470-1735

Miami-Dade County is a public entity subject to Florida Statutes Chapter 119, Public Records. E-mail messages are subject to public records disclosure, and with limited exceptions are not exempt from chapter 119.

Memorandum

MIAMI-DADE COUNTY

Date: November 20, 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

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 is being requested by a not-for-profit organization the Foundation for Human Rights in Cuba, Inc. for their 20th Anniversary Cuban Exodus Relief Project event held on September 21, 2008.

In-kind services have been requested in an amount not to exceed $4,182 from the Miami-Dade Park and Recreation Department for the use of the Tropical Park – Equestrian Center and $1,033 from the Miami-Dade Police Department for personnel services, for a total in-kind amount of $5,215. This event will be funded from District 10 in-kind reserve fund.

In FY 2007-08, the Foundation for Human Rights in Cuba, Inc. has received no county funding for this event.

Inkind14208