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

MEMORANDUM

Agenda Item No. 11(A)(25)

TO:

Honorable Chairman Dennis C. Moss

and Members, Board of County Commissioners

DATE:

April 7, 2009

FROM:

R. A. Cuevas, Jr.

County Attorney

SUBJECT:

Resolution retroactively

authorizing in-kind services for the February 27, 2009

"Carnaval Miami 8K Run"

Resolution No. R-396-09

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Commissioner Sally A. Heyman.

R. A. Cuevas, Jr. County Attorney

RAC/up

TO:

Honorable Chairman Dennis C. Moss

DATE:

April 7, 2009

and Members, Board of County Commissioners

FROM: R. A.

County Attorney

SUBJECT: Agenda Item No. 11(A)(25)

1 101	se note any stems encercu.
	"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 Mayor'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	Agenda Item No.	11(A)(25)
Veto _		4-7-09	
Override			

RESOLUTION NO. R-396-09

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK RECREATION DEPARTMENT FOR THE FEBRUARY 27, 2009 "CARNAVAL MIAMI 8K RUN" SPONSORED BY THE KIWANIS CLUB OF LITTLE HAVANA, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT **FUNDED** EXCEED \$1,225.00 TO BEFROM THE COUNTYWIDE IN-KIND RESERVE FUND

WHEREAS, the Kiwanis Club of Little Havana, Inc. has requested in-kind services from the Miami-Dade Park and Recreation Department for the February 27, 2009 "Carnaval Miami 8K Run" in an amount not to exceed \$1,225.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the purpose of the "Carnaval Miami 8K Run" is to, among other things, raise funds for worthy projects and programs including the Children's Cancer Clinic; and

WHEREAS, the Kiwanis Club of Little Havana, Inc. is a not-for-profit organization; and WHEREAS, the "Carnaval Miami 8K Run" is a special event, as that term is defined on the attached Fee Waiver/In-kind Service Application, and the fee waiver shall be funded from the Countywide 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 a fee waiver from the Miami-Dade Park and Recreation Department for the February 27, 2009 "Carnaval Miami 8K Run" in an amount not to exceed \$1,225.00 to be funded from the Countywide In-kind Reserve Fund.

Resolution No. R-396-09

Agenda Item No. 11(A)(25) Page No. 2

The Prime Sponsor of the foregoing resolution is Commissioner Sally A. Heyman. It was offered by Commissioner Joe A. Martinez , 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:

Dennis C. Moss, Chairman **aye** Jose "Pepe" Diaz, Vice-Chairman **aye**

Bruno A. Barreiro	absent	Audrey M. Edmonson	aye
Carlos A. Gimenez	aye	Sally A. Heyman	aye
Joe A. Martinez	aye	Barbara J. Jordan	aye
Dorrin D. Rolle	aye	Natacha Seijas	aye
Katy Sorenson	aye	Rebeca Sosa	aye
Sen. Javier D. Souto	aye		3

The Chairperson thereupon declared the resolution duly passed and adopted this 7th day of April, 2009. 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

HARVE

HARVEY RUVIN, CLERK

By: Kay Sullivan
Deputy Clerk

Approved by County Attorney as to form and legal sufficiency.

GKS

Gerald K. Sanchez

NO. 510 P. 2

MIAMI-DADE COUNTY FEE WAIVER/IN-KIND SERVICES APPLICATION FY 2008-09

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 follow	wing form and submit completed form along with requeste	d materials, if	applicable, to:	
	111 N	of Strategic Business Management .W. 1st Street, Suite 2200 , FL 33128	Phone: Fax:	(305) 375-5143 (305) 375-5168	
Type of	Event/Application	(select one of the following):			
0	District Event -	Event of minimal impact related to specific commission submitted to the appropriate District Commissioner with			
	Small Event -	Event of minimal impact not necessarily related to a spe date.)	cific commissio	ion district. (Complete questions 1-7, sign and	
×	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.)				
D	Major Event* -	Large Event with expected attendance of over 5,000 or vandalism (Complete questions 1-12, sign, date and suf			
		"Note: Event budget must be included for "Sp	ecial" and "M	lajor" event types."*	
	nissioner sponsori I legal name of the	ng event <u>COMMISSIONER Sall</u> requesting organization: <u>Liwasis</u> d	y Hey	man Little Harana	-
2. App	plicant Status: (Se	lect one of the choices below)			
	For-Pr	or-Profit or Tax Exempt ofit Government or Public Entity (specify):			
3. Na	me and contact in	grmation for single point of contact (address, phone, fax,	e-mail address	s, etc.):	
_	140	D. S.W. First Street, Min	mi, k	1 32/35	_ _
7	. 305-0	644-8888 F. 305-644.	8693	SVIETA OCARAMINA	ani Cen
4. Spe	ecify fee waiver or	in-kind service requested (quantify, if applicable):	for .	Showalskije Stape	<u>-</u> -

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): CAR NAME Him: SK Run - Him, Francisco Line 17, 20
	An & Kilonistee & 5 x WALK The Calle Och in Little HANNA To benefit the Consulvaity Plusteets a frograms of the Kiwanis Club of Little HANNA And Childrens Cancer Clinic
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)): Southwest 8 Street At Intersection a), the Papiere II Avenue - Siste, et 3
8.	Description of regional or local impact:
	CAILE Ocho &K Runs Attracts Runners of All Ages.
	It befine with A Kiddie South Continues with A
	High School Challenge a Culificates with the ST Kin.
	Childrena Stusents faction poto FLEE
9.	Oaily/hourly event schedule, including sat-up and breakdown schedule (attach event calendar, if applicable):
	And breakdown At 10:00 Pay.
raps Revis	2 of 3 ed: 9/4/08

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): RACE Course Starts on SSt. & S.E. I Avenue
	applicable): Lace Course Starts on SST. d. S.E. I Avenue To 22 Avenue finishing Back on S.E. I Avenue
11.	Expected number of participants and estimated attendance (per day, if applicable): All. 1.500 Linners
12	Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach
12.	additional pages as needed): AttRew The Encloses
l he	reby contify that all the statements reade in this application are true and correct.
	ALGN 1/14/08
Sign	nature of Authorized Representative

CARNAVAL M	
BUDO	
200	9
REVENUES	
Title Sponsorship:	\$33,000
Other Sponsors/Revenue:	6,000
Entry Fees	15,000
Bad Debt Recovery (Truth 00')	
TOTAL REVENUES	\$54,000
7017212721020	
EXPENSES	
8K Promotion	\$1,925
8K Run Prizes	4,500
T-Shirts	2,000
Race Management Fee	5,000
Credit Card Fees	350
Police	10,000
Fire & Rescue	1,500
Clean Up	950
Barricades/Labor	5,000
Portable Toilets	450
Entertainment	1,000
Temp Pole/Electricity	1,000
Rentals (Trucks, Tables, Etc.)	1,450
Banners/Signs	2,500
Printing	3,000
Food/Refreshments/Ice	5,975
Race #, Packs, Pins, Bags	1,000
Mailouts/Postage	1;800
Insurance	750
Photography	350
Timing	2,000
PA System	250
Race Day Workers	750
Miscellaneous	500
TOTAL EXPENSES	54,000
I OTAL LATEROLO	34,000
NET PROFIT (Loss)	\$0

Department of the Treasury internal Revenue Service Quality Review Staff Taxpayer Assistance Group P. O. Box 1055 - RM 907 Atlanta, Georgia 30370-0000

RECEIVED JUL 3 1 1989

Date: JUL 26 1989

Your Letter Dated: 06/02/89

Refer Reply to: QRS:EO:TPA

EIN: 51-0169294

KIWANIS CLUB OF LITTLE HAVANA, INC. % LESLIE V. PANTIN 970 SW FIRST ST 408 MIAMI, FL 33130-1112

Parent Organization: KIWANIS INTERNATIONAL NATIONAL '

Dear Taxpayer:

This is in response to your request for confirmation of your exemption from Federal Income Tax.

Your organization was recognized as exempt from Federal Income Tax under section 501(c)(4) of the Internal Revenue Code July, 1940.

Your organization is a subordinate unit of the parent organization identified above, which is covered under group exemption number 0026.

Please let us know of any change in your purpose, character, or method of operation so we may consider the effect of the change on your exempt status. Also, you should inform us of any change in your name or address. If you have any questions, please write to the address shown above.

Thank you for your cooperation.

sincerely yours,

Exempt Organizations Coordinator



SHOWMOBILES, STAGES, BLEACHERS, AND SOUND PRODUCTION (305) 226-8315 Ext. 224/(305) 553-8511 (Fax)

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: Kiwasis Club of Little HAVANA
EQUIPMENT REQUESTED:
NAME OF BERSON RESPONSIBLE FOR THIS RUL.
OR INDEX CODE (MIAMI-DADE COUNTY AGENCIES ONLY): CCCent Olunda
BILLING ADDRESS/ZIP CODE: 1400 S.W. Fiest Street Miami F1 33135
NAME/TITLE OF THE EVENT: PARIABL Mani 84 Run
ADDRESS OF EVENT: BREEF AVENUE W. S.W. 8 Street
TODAY'S DATE: Friday 2/27.
SET-UP TIME & DAY: PRI- 2/27 (2:00 PH)
TAKE-DOWN & DAY: Fe: 2/34 D 10:00 Pry.
CONTACT PERSON/PHONE: FEER LIGHTY 305- 219-1106 AT SITE CONTACT/CELL PHONE #: Jose 1 - 186-219-6943
SPECIAL INSTRUCTIONS: Direction item(s) are to be placed, maps, diagrams, etc.
OTHER INFORMATION: Include additional equipment if needed.
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
CANCELLATIONS MUST BE MADE 72 HOURS IN ADVANCE OF THE EVENT BY FAX OR EMAIL OTHERWISE EXPECT TO BE CHARGED

CANCELLATIONS MUST BE MADE 72 HOURS IN ADVANCE OF THE EVENT BY FAX OR EMAIL OTHERWISE EXPECT TO BE CHARGED 1/2 (HALF) OF RENTAL FEE. *These wall be completed exercition on the schedule indess the configuration forms to the completed by the configuration forms to the configuration for the configuration forms to th



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No Name History

Entity Name S

Detail by Entity Name

Florida Non Profit Corporation

KIWANIS CLUB OF LITTLE HAVANA, INC.

Filing Information

Document Number 737783

FEI Number

510169294

Date Filed

01/11/1977

State

FL

Status

ACTIVE

Principal Address

1400 SW FIRST STREET **MIAMI FL 33135**

Changed 05/01/2007

Mailing Address

1400 SW FIRST STREET MIAMI FL 33135

Changed 05/01/2007

Registered Agent Name & Address

PATIN, LESLIE JR. 1400 SW FIRST STREET MIAMI FL 33135 US

Address Changed: 05/01/2007

Officer/Director Detail

Name & Address

Title P

GONZALEZ, RICARDO C 8852 SW 59 STREET MIAMI FL 33173

Title S

THOMAS, FALCON E

717 TIZIANO AVENUE CORAL GABLES FL 33143

Title VP

COSIO, ARMANDO 7435 SW 86 COURT MIAMI FL 33143

Title T

LEBENA, JESUS 16852 NW 88TH PATH MIAMI LAKES FL 33018

Title VVP

GARCIA, CARLOS 6545 SW 72 CT. MIAMI FL 33143

Title AT

POMBO, GERRY 15740 SW 99 TERRACE MIAMI FL 33196

Annual Reports

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Rodriguez, Nadia (OSBM)

From:

Byrnes, Timothy (MDPR)

Sent:

Monday, February 02, 2009 3:44 PM

To:

Rodriguez, Nadia (OSBM)

Cc:

Gonzalez, Ana (MDPR); Morgan, Tom (MDPR)

Subject:

RE: in-kind

Nadia, per your request see our responses below, Tim

Tim Byrnes, Tropical Park/Trail Glades Range/Showmobile 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: Rodriguez, Nadia (OSBM)

Sent: Monday, February 02, 2009 2:02 PM

To: Byrnes, Timothy (MDPR)

Subject: in-kind

Good afternoon,

Please provide me with the cost estimates for the following events:

Kiwanis Club Carnival and 8K Run_2/27 medium showmobile \$1,225.00

Church in Dade County_4/6-7 This group has not made contact with us as of today 02/02/09

Creative Children Therapy_2/28 If this is the event at Kendall Indian Hammocks Park the cost is \$3,390.00

City of N Miami Beach Comm. Festival_3/1 large showmobile \$2,566.00

Nadia L. Rodriguez
Office of Strategic Business Management
111 NW 1 St, 22nd Floor
Miami, Fl 33128
Tel: (305) 375-4183





Date:

April 7, 2009

To:

Honorable Chairman, Dennis C. Moss

and Members, Board of County Commissioners

From:

George M. Burges

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 has been requested by a not-for-profit organization the Kiwanis Club of Little Havana, Inc. for their "Carnaval Miami 8K Run" held on February 27, 2009.

In-kind services have been requested in an amount not to exceed \$1,225 from the Miami-Dade Park and Recreation Department for the use of a medium show mobile. This event will be funded from the countywide in-kind reserve fund.

In FY 2008-09, the Kiwanis Club of Little Havana, Inc. has received \$500 from District 11 office funds and \$1,375 from District 12 discretionary reserve. In addition, the organization has requested a cash allocation from the in-kind reserve of \$50,000 pending Board of County Commissioner approval at the March 3, 2009 meeting.

Inkind06309