

MEMORANDUM

Agenda Item No. 11(A)(49)

TO: Honorable Chairman Dennis C. Moss
and Members, Board of County Commissioners

DATE: May 5, 2009

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

SUBJECT: Resolution retroactively
authorizing in-kind services
for the April 6-9, 2009
"Spring Break Camp"
Resolution No. R-592-09

The accompanying resolution was prepared and placed on the agenda at the request of Co-Prime Sponsors Senator Javier D. Souto and Commissioner Rebeca Sosa.



R. A. Cuevas, Jr.
County Attorney

RAC/up



MEMORANDUM
(Revised)

TO: Honorable Chairman Dennis C. Moss
and Members, Board of County Commissioners

DATE: May 5, 2009

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

SUBJECT: Agenda Item No. 11(A)(49)

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 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
Veto _____
Override _____

Agenda Item No. 11 (A) (49)
5-5-09

RESOLUTION NO. R-592-09

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT FOR THE APRIL 6-9, 2009 "SPRING BREAK CAMP" SPONSORED BY CHURCH IN DADE COUNTY, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$4,000.00 TO BE FUNDED IN PART FROM DISTRICT 10 AND IN PART FROM DISTRICT 6 IN-KIND RESERVE FUNDS

WHEREAS, Church in Dade County, Inc. has requested in-kind services from the Miami-Dade Park and Recreation Department for the April 6-9, 2009 "Spring Break Camp" in an amount not to exceed \$4,000.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the "Spring Break Camp" provides "at risk" children with the opportunity to enjoy a fun-filled spring break experience in a safe environment; and

WHEREAS, Church in Dade County, Inc. is a not-for-profit organization; and

WHEREAS, the "Spring Break Camp" is a small event, as that term is defined on the attached Fee Waiver/In-kind Service Application, and \$4,000.00 of the in-kind services shall be funded in part from District 10 and in part from District 6 In-kind Reserve Funds,

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 April 6-9, 2009 "Spring Break Camp" in an amount not to exceed \$4,000.00 to be funded in part from the District 10 and in part from the District 6 In-kind Reserve Funds.

The Co-Prime Sponsors of the foregoing resolution are Senator Javier D. Souto and Commissioner Rebeca Sosa. It was offered by Commissioner **Jose "Pepe" Diaz**, who moved its adoption. The motion was seconded by Commissioner **Carlos A. Gimenez** 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	aye	Audrey M. Edmonson	aye
Carlos A. Gimenez	aye	Sally A. Heyman	aye
Barbara J. Jordan	aye	Joe A. Martinez	aye
Dorin D. Rolle	aye	Natacha Seijas	aye
Katy Sorenson	aye	Rebeca Sosa	absent
Sen. Javier D. Souto	aye		

The Chairperson thereupon declared the resolution duly passed and adopted this 5th day of May, 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

HARVEY RUVIN, CLERK

By: **Diane Collins**
Deputy Clerk



Approved by County Attorney as to form and legal sufficiency. GKS

Gerald K. Sanchez



*Pages 4,000
46-9*

**Board of County Commissioners
Commissioner Rebeca Sosa
District 6**

Downtown Office

111 N.W. 1 Street, Suite 220
Miami, Florida 33128
Tel: 305-375-5696
Fax: 305-372-6090

District Office

1000 S.W. 57 Avenue, Suite 201
Miami, Florida 33144
Tel: 305-267-6377
Fax: 305-267-6366

Date:

To: *Nader Rodriguez*

- From:
- Commissioner Rebeca Sosa
 - Roly Marante, Chief of Staff
 - Lourdes Milian, District Office Manager
 - Gloria Palacios, Commission Aide
 - Omara Gonzalez, Commission Aide
 - Ivonne Perez Suarez, Communications Director
 - Betty Aguirre, Commission Aide/Scheduler
 - Jose Daniel, Commission Aide
 - Natalie Millan, Commission Aide
 - Purita Martin, Commission Aide

Fax: *305-375-6168* Phone: *305-267-6377*

Phone: *305-375-5143* Pages: *11*

Re: *Church in Dade County - Spring Break Camp* CC:

- Urgent For Review Please Comment Please Reply Please Recycle

● Comments:

Nader
The Commissioner is granting
\$2000 from District 6 on hand.
I understand that as for, Comm
Santa has granted \$2,000 as well

Lourdes

6/10

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 following form and submit completed form along with requested materials, if applicable, to:

Office of Strategic Business Management
111 N.W. 1st Street, Suite 2200
Miami, FL 33128

Phone: (305) 375-5143
Fax: (305) 375-5188

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.

Commissioner sponsoring event Rebeca Sosa / Soto

1. Full legal name of the requesting organization: Church in Dade County, 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.): _____

Alicia de Armas
9360 S.W. 24 street Miami FL 33165
Phone: 305-778-6776 / Fax: 305-372-0408 / E-mail: alidearmas@
aol.com

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

Fee waiver for Camp Owaissa Pauer camping fees,
for 125 campers and counselors.

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): _____

Spring Break Camp - April 6 to 9, 2009.
Camp for Hispanic and Afro-American children, grades
1 through 12. For "at risk" children who need clear
guidelines for a productive and satisfying life.
We provide an atmosphere of fun, security and guidance.

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)): _____

Located in District 8 (camp grounds). Majority of children in Districts 2, 3, 6, 10 and 11. Several children in other districts.
Camp Owaissa Pomer, 17001 SW 204 St. Miami, FL 33031

8. Description of regional or local impact: n/a

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

See attached.

MIAMI-DADE COUNTY
FEE WAIVER/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): n/a



11. Expected number of participants and estimated attendance (per day, if applicable): 125 participants for 4 days.

12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): Budget attached.

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

Maria R. Schief
Signature of Authorized Representative
Camp Director
President, Church in Dade Co.

3-10-09
Date

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS			
Home	Contact Us	E-Filing Services	Document Searches
Forms	Help		
Previous on List Next on List Return To List			
No Events No Name History			
Detail by Entity Name			
Florida Non Profit Corporat <input type="text" value="Entity Name Search"/>			
CHURCH IN DADE COUNTY, INC.			
<u>Filing Information</u>			
Document Number 757433 FEI Number 650199248 Date Filed 04/07/1981 State FL Status ACTIVE			
<u>Principal Address</u>			
1425 SW 92 COURT MIAMI FL 33174 Changed 08/09/2000			
<u>Mailing Address</u>			
15256 SW 25 TERR MIAMI FL 33185 Changed 06/17/2004			
<u>Registered Agent Name & Address</u>			
PEDREGUERA, ALINA 15256 SW 25 TERR MIAMI FL 33185 Name Changed: 09/11/2002 Address Changed: 08/17/2004			
<u>Officer/Director Detail</u>			
Name & Address			
Title PD SCHWARTZ, MARIA 158 S.W. 96TH CT. MIAMI FL 33174			
Title VD PRIETO, ANA O 1425 SW 92ND CT MIAMI FL 33174			

Title STD

PEREQUERA, ALINA
15256 SW 25 TERRACE
MIAMI FL 33185

Annual Reports

Report Year Filed Date

2006	05/22/2006
2007	03/31/2007
2008	01/28/2008

Document Images

<u>01/28/2008 -- ANNUAL REPORT</u>	View image in PDF format
<u>03/31/2007 -- ANNUAL REPORT</u>	View image in PDF format
<u>05/22/2006 -- ANNUAL REPORT</u>	View image in PDF format
<u>06/30/2005 -- ANNUAL REPORT</u>	View image in PDF format
<u>06/17/2004 -- ANNUAL REPORT</u>	View image in PDF format
<u>05/28/2003 -- ANNUAL REPORT</u>	View image in PDF format
<u>09/11/2002 -- ANNUAL REPORT</u>	View image in PDF format
<u>07/26/2001 -- ANNUAL REPORT</u>	View image in PDF format
<u>08/09/2000 -- ANNUAL REPORT</u>	View image in PDF format
<u>07/26/1999 -- ANNUAL REPORT</u>	View image in PDF format
<u>09/03/1998 -- ANNUAL REPORT</u>	View image in PDF format
<u>06/13/1997 -- ANNUAL REPORT</u>	View image in PDF format
<u>07/31/1996 -- ANNUAL REPORT</u>	View image in PDF format
<u>07/31/1995 -- ANNUAL REPORT</u>	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](#)

No Events No Name History

Entity Name Search

SPRING BREAK CAMP
REVENUE AND EXPENSES BUDGET
JANUARY 28, 2009

Revenues:

Sponsors	2,000.00
Registrations	3,800.00
Fund-Raising Activities	<u>500.00</u>
	<u>\$ 6,300.00</u>

Expenses:

Camp fees	(10,425.00)
Food expenses	(3,500.00)
Arts and crafts	(750.00)
Music Equipment	(1,000.00)
Printing	(220.00)
T-shirts	(1,500.00)
Transportation (2 buses)	<u>(1,000.00)</u>
	<u>(18,395.00)</u>

<u>Excess of Expenses over Revenues</u>	<u>(12,095.00)</u>
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SPRING BREAK CAMP

CAMP OWAISSA BAUER

ESTIMATED CAMP EXPENSES - APRIL, 2009

4 Cabins (sleep 100 - children and counselors)	\$6,600.00
Extra Cabin (sleeps 25 children)	1,350.00
Director's Quarters	150.00
Cooks' Quarters	300.00
First Aid Room	270.00
Pool - 4 hours/day x 3 days	1,140.00
Campfire - 1 day	85.00
Fans - 3 days	90.00
Hay ride - 3 days	<u>440.00</u>
	<u>\$10,425.00</u>

**2009
SPRING BREAK CAMP PROGRAM**

Monday - 6

8:00 - 9:00 am Camp preparation by staff
 9:00 - 10:00 am Registration
 10:00 - 10:30 am Orientation in Cabin
 10:30 - 11:00 am Dining Hall - Meeting
 11:00 - 12:00 pm Classes
 11:50 am Lunch K-4
 12:00 - 1:00 pm Lunch
 1:00 - 6:00 pm Sports, Crafts & Games (See Activities Schedule)
 5:50 pm Dinner K-4
 6:00 - 7:00 pm Dinner
 7:00 - 8:00 pm Special Presentation
 8:00 pm Songs and Campers' Interaction

Tuesday - 7

7:00 - 8:00 am *Rise & Shine*
 8:00 - 9:00 am Breakfast
 9:00 - 9:45 am Testimonies - Sharing
 10:00 - 11:45 am Classes
 11:45 - 12:00 pm Counselors will meet with campers in their cabins
 12:00 - 12:15 pm Cabin Pictures, front of Dining Hall
 11:50 am K-4 Cabin Picture and Lunch
 12:00 - 1:00 pm Cabin Picture and Lunch
 1:00 - 6:00 pm Sports, Crafts & Games (See Activities Schedule)
 5:50 pm Dinner K-4
 6:00 - 7:00 pm Dinner (Special Announcement)
 7:30 - 8:00 pm Special Presentation
 9:15 pm Camp Fire

Wednesday - 8

7:00 - 8:00 am *Rise & Shine*
 8:00 - 9:00 am Breakfast
 9:00 - 9:45 am Nature Walk
 10:00 - 11:45 am Classes
 11:45 - 12:00 pm Counselors will meet with campers in their cabins
 11:50 am Lunch K-4
 12:00 - 1:00 pm Lunch
 1:00 - 5:30 pm Sports, Crafts & Games (See Activities Schedule)
 5:30 - 6:00 pm Group Picture with T-Shirts, front of Dining Hall
 5:50 pm Dinner K-4
 6:00 - 7:00 pm Dinner
 7:00 - 11:00 pm Dining Room / Special Event

Thursday - 9

7:00 - 8:00 am *Rise & Shine*
 8:00 - 9:00 am Breakfast
 9:00 - 11:30 am Special Service — All
 11:30 am Bag Lunch by Cabin — Departure

Form **W-9**
(Rev. January 2009)
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 Church in Dade County, Inc.
Business name, if different from above

Check appropriate box: Individual/ Sole proprietor Corporation Partnership Other Non-profit Corporation Exempt from backup withholding

Address (number, street, and apt. or suite no.)
9360 SW 24 St.

City, state, and ZIP code
Miami FL 33105

List account number(s) here (optional)

Requester's name and address (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.

Social security number

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or

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

Employer identification number
015701199248

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- 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 Maria R. Schwart Date 3-10-09

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:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- 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:

- The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
- The treaty article addressing the income.
- The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
- The type and amount of income that qualifies for the exemption from tax.
- Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Camp Owalssa Bauer
Encampment Fee Worksheet

Please fax or email back to Camp OB

All Encampments Must Be A
Minimum of 2 Nights

GROUP NAME: CHURCH IN DADE COUNTY

	Cost ea. / per day		Number of Nights <small>*See conditions below</small>	Total Cost Multiply Cost X Number of Nights												
4 Cabins - Minimum (Sleeps 100)	\$2,200.00		3	\$ 6,600.00												
Extra Cabins (2 - sleep 25 each)	1 Cabin = \$450.00 Cabins = \$900.00	2 1 Extra Cabin: _____ Extra Cabins: _____	2	-												
Blue Jay- Quarter (Sleeps 2) <i>No Minimum</i>	\$50.00		3	150.00												
Cardinal- Quarter (Sleeps 4) <i>No Minimum</i>	\$100.00		3	300.00												
Mockingbird- Quarter (Sleeps 4) <i>No Minimum</i>	\$90.00		3	270.00												
Meeting Room <i>No Minimum</i>	\$85.00		3	255.00												
Pool	\$200.00 / 2 hr. min. \$90.00 ea. additional hr.	Dates(s): <table border="0"><tr><td>M</td><td>T</td><td>W</td><td>TH</td></tr><tr><td>4/6</td><td>4/7</td><td>4/8</td><td>4/9</td></tr></table> Time: <table border="0"><tr><td>4/6 - 4/8</td><td>2-4 pm</td></tr><tr><td>4/9</td><td>10:30-11:30 pm</td></tr></table>	M	T	W	TH	4/6	4/7	4/8	4/9	4/6 - 4/8	2-4 pm	4/9	10:30-11:30 pm	4	800.00
M	T	W	TH													
4/6	4/7	4/8	4/9													
4/6 - 4/8	2-4 pm															
4/9	10:30-11:30 pm															
Campfire	\$85.00 per 1.5 hours	Dates(s): _____ Time: _____		-												
Hayride	\$110.00 per 1 hour	Dates(s): _____ Time: _____		-												
Fans	\$10.00	Qty: _____		-												
Podium	\$50.00			-												
Hot Table / 5 Station Steam Table	\$50.00 \$200 for 5 days			Currently unavailable												
Light Towers <i>Must order in advance. Prices vary.</i>																
TOTAL				\$ 8,375.00												

August-May the following applies: Weekday rentals available Mon.-Wed. Weekend rentals Fri.-Sun. (min. 2 nights).

May-July the following apply:

2 nights, Check-In Monday at 12 noon and leave Wednesday by 12 noon.

3 nights, Check-In Thursday at 12 noon and leave Sunday by 12 noon.

5 nights, Check-In Monday at 12 noon and leave Saturday by 12 noon.

School Groups - Contact Park Office.

If your group would like any of the special activities (hayride, pool, campfire) please provide the dates and times preferred at least 4 weeks prior to your encampment, as staff must be scheduled to conduct those activities. All activities must end by 10:30pm at the latest.

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Rodriguez, Nadia (OSBM)

From: Naumann, Andre (DIST10)
Sent: Monday, March 16, 2009 11:35 AM
To: Rodriguez, Nadia (OSBM)
Subject: RE: Church in Dade County

Follow Up Flag: Follow up
Flag Status: Flagged

Hi Nadia,

I have the ok for \$2,000 for the Camp event

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: Rodriguez, Nadia (OSBM)
Sent: Tuesday, March 10, 2009 1:19 PM
To: Naumann, Andre (DIST10)
Subject: RE: Church in Dade County

Spring break camp scheduled on 4/6/09.

From: Naumann, Andre (DIST10)
Sent: Tuesday, March 10, 2009 11:04 AM
To: Rodriguez, Nadia (OSBM)
Subject: RE: Church in Dade County

I'm sorry. I can't remember which church this is. Could you clarify a little bit.

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: Rodriguez, Nadia (OSBM)
Sent: Monday, March 09, 2009 1:03 PM

Memorandum



Date: May 5, 2009

To: Honorable Chairman. Dennis C. Moss
and Members, Board of County Commissioners

From: George M. Burgess
County Manager 

Subject: District Specific In-Kind Reserve Request Recommendation

Recommendation

The Office of Strategic Business Management (OSBM) has reviewed the attached in-kind request and recommends for this item to move forward to the Board of County Commissioners for consideration. The district specific in-kind reserve balances allow for the funding of this request.

Background

A retroactive waiver for in-kind services is being requested by a not-for-profit organization the Church in Dade County, Inc., for their "Spring Break Camp" event held on April 6-9, 2009.

In-kind services have been requested in an amount not to exceed \$4,000 from the Miami-Dade Park and Recreation Department for Camp Owaissa Bauer fees for 125 participants. This event will be funded in part from District 10 (\$2,000) and in part from District 6 (\$2,000) in-kind reserve funds.

In FY 2008-09, the Church in Dade County Inc. has received \$2,000 from District 3 discretionary reserve, \$1,000 from District 7 discretionary reserve, and \$500 from District 11 discretionary reserve. — — — —

Inkind09309