



MEMORANDUM

Agenda Item No. 11 (A) (19)

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


DATE: March 2, 2010

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

SUBJECT: Resolution retroactively authorizing
in-kind services for the February 21,
2010 "Charity Dog Show" event

Resolution No. R-268-10

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/cp



MEMORANDUM

(Revised)

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

DATE: March 2, 2010

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

SUBJECT: Agenda Item No. 11(A) (19)

Please note any items checked.

- "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**
- Ordinance creating a new board requires detailed County Manager's report for public hearing**
- No committee review**
- Applicable legislation requires more than a majority vote (i.e., 2/3's ____, 3/5's ____, unanimous ____) to approve**
- Current information regarding funding source, index code and available balance, and available capacity (if debt is contemplated) required**

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 11(A) (19)
3-2-10

RESOLUTION NO. R-268-10

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT FOR THE FEBRUARY 21, 2010 "CHARITY DOG SHOW" SPONSORED BY THE KIWANIS CLUB OF NORTH SHORE MIAMI BEACH, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$750.00 TO BE FUNDED FROM THE UNSPENT BALANCE OF THE DISTRICT 4 FY 2008-09 IN-KIND RESERVE FUND

WHEREAS, Kiwanis Club of North Shore Miami Beach, Inc. has requested in-kind services from the Miami-Dade Park and Recreation Department for the February 21, 2010 "Charity Dog Show" in an amount not to exceed \$750.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the "Charity Dog Show" is a fundraiser for the Kiwanis Club of North Shore Miami Beach to benefit various children's programs throughout Miami-Dade County; and

WHEREAS, Kiwanis Club of North Shore Miami Beach, Inc. is a not-for-profit organization; and

WHEREAS, the "Charity Dog Show" is a small event, as that term is defined on the attached Fee Waiver/In-kind Service Application, and \$750.00 of the in-kind services shall be funded from the unspent balance of the District 4 FY 2008-09 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 for the February 21, 2010 "Charity Dog Show" in an amount not to exceed \$750.00 to be funded from the unspent balance of the District 4 FY 2008-09 In-kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Sally A. Heyman. It was offered by Commissioner **Jose "Pepe" Diaz**, 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:

	Dennis C. Moss, Chairman	aye	
	Jose "Pepe" Diaz, Vice-Chairman	aye	
Bruno A. Barreiro	absent	Audrey M. Edmonson	aye
Carlos A. Gimenez	absent	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		

The Chairperson thereupon declared the resolution duly passed and adopted this 2nd day of March, 2010. 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.

Gerald K. Sanchez

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) 375-5168

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.

Commissioner sponsoring event _____

1. Full legal name of the requesting organization: NORTHSHORE KIWANIS

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.): _____

LOW CORNER, 9341 COLLINS AVE. #1009, SUITESIDE 33154
RE'S PHONE: 305 868 3657 FAX 305 868 3657
E-MAIL

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

SUNDAY, FEBRUARY 21, 2000 FREE RENT CARP WASH

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FEE WAIVER/IN-KIND SERVICES APPLICATION
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5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries):

CHARITY DANCE SHOW
FEB. 21, 2010
ALL PROCEED GO TOWARD YOUTH PROGRAMS:
BISCAYNE ELEMENTARY SCHOOL
KIM K. BRADY ELEMENTARY SCHOOL
SUNSHINE CHILDREN'S SUMMER CAMP

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)):

94TH STREET EAST OF THE DEATH HARBOR IN SUNSHINE BEHIND
THE BEST WESTERN OCEAN FRONT RESORT
COMMISSION DISTRICT 4

8. Description of regional or local impact:

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

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FEE WAIVER/IN-KIND SERVICES APPLICATION
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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.

Joni Coleman
Signature of Authorized Representative

Dec 14, 2009
Date

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

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: NORTHSHORE KIWANIS

EQUIPMENT REQUESTED: SMALL STAGE

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Louis Coleman
Commissioner Heyman

OR INDEX CODE (MIAMI-DADE AGENCIES ONLY): CCCEN010496

BILLING ADDRESS/ZIP CODE: 9341 COLLINS AVE. #1008
SURFSIDE, FL 33154

NAME/TITLE OF THE EVENT: CHARITY DOG SHOW

ADDRESS OF EVENT: 94TH ST. AND THE BEACH IN SURFSIDE

TODAY'S DATE: DEC. 14, 2007 DATE (S) & TIME OF EVENT: FEB. 21, 2010

SET-UP TIME & DAY: 8:30 AM SUNDAY

TAKE-DOWN TIME & DAY: NOON SUNDAY

CONTACT PERSON/PHONE: LOUIS COLEMAN 305 568 3097
AT SITE CONTACT/CELL PHONE#: 305 704 1824

SPECIAL INSTRUCTIONS: Direction item(s) are to be placed, maps, diagrams, etc.
RESTRICTION TO BEACH AT 96TH ST. AND COLLINS AVE. PLACE AT
SOUTH 2 BLOCKS - SET UP BEHIND BEST WESTERN.

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: _____ Signature: Louis Coleman

(SEE FEE SCHEDULE FOR EXACT CHARGES)

Agency/Group: _____

**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. *There will be no completed reservation on the schedule unless the
confirmation Form is filled out completely and signed.**

Late equipment arrivals, please call (706) 286-7026

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Rodriguez, Nadia (OSBM)

From: Mankes, Margot (DIST4)
Sent: Tuesday, December 08, 2009 9:56 AM
To: Byrnes, Timothy (MDPR); Amador, Margaret (DIST4)
Cc: Gonzalez, Ana (MDPR); Morgan, Tom (MDPR); Rodriguez, Nadia (OSBM)
Subject: RE: North Shore Kiwanis Charity Dog Show 02/21/10

Good morning Tim,

Commissioner Heyman has approved the 16 x 16 stage for \$750 for this event. Thank you.

Margot Mankes, Aide
Office of Commissioner Sally Heyman
111 NW 1st Street, Suite 220
Miami, FL 33128
(305) 375-5128
(305) 372-6179 fax
mmankes@miamidade.gov

"Delivering Excellence Every Day"

From: Byrnes, Timothy (MDPR)
Sent: Thursday, December 03, 2009 8:22 AM
To: Amador, Margaret (DIST4)
Cc: Mankes, Margot (DIST4); Gonzalez, Ana (MDPR); Morgan, Tom (MDPR)
Subject: North Shore Kiwanis Charity Dog Show 02/21/10

Margaret,
We have put on hold for you until you make your final decision both the small showmobile and the 16' X 16' stage for the
aforementioned event;

The cost for the requested items:

- ▶ Showmobile small \$1,300.00
- ▶ Sage 16' X 16' \$750.00

Please let me know what direction you would like to go with this event.
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: Amador, Margaret (DIST4)
Sent: Tuesday, December 01, 2009 1:01 PM
To: Byrnes, Timothy (MDPR)
Cc: Mankes, Margot (DIST4)
Subject: Need price for Feb 21, 2010 event
Importance: High

Tim,

Could you please provide us with a cost estimate for:

Small Showmobile
and
Small Stage

N. Shore Kiwanis Charity Dog Show
Sunday, February 21st
10 a.m. – 12 noon

Set up: 9 a.m.
Breakdown: 12:30 p.m.

Thanks!

Margie Amador Robinson, Aide
Miami-Dade County Commissioner Sally Heyman
1100 NE 163rd Street, #303
North Miami Beach, FL 33162
305-787-5999 Fax: 305-787-5998
amadorm@miamidade.gov

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Detail by Entity Name

Florida Non Profit Corporation

KIWANIS CLUB OF NORTH SHORE MIAMI BEACH, INC.

Filing Information

Document Number 750753
FEI/EIN Number 596152429
Date Filed 01/24/1980
State FL
Status ACTIVE
Last Event CANCEL ADM DISS/REV
Event Date Filed 10/03/2006
Event Effective Date NONE

Principal Address

C/O HAUSER
 1111 KANE CONCOURSE, #616
 BAY HARBOR ISLAND FL 33154

Changed 10/03/2006

Mailing Address

C/O HAUSER
 1111 KANE CONCOURSE, #616
 BAY HARBOR ISLAND FL 33154

Changed 10/03/2006

Registered Agent Name & Address

HAUSER, MARC ESQ.
 1111 KANE CONCOURSE, #616
 BAY HARBOR ISLAND FL 33154

Name Changed: 10/03/2006

Address Changed: 10/03/2006

Officer/Director Detail

Name & Address

Title D

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Memorandum



Date: March 2, 2010

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

From: George M. Burgess
County Manager

A handwritten signature in black ink, appearing to read "George M. Burgess", written over a faint, dotted grid background.

Subject: District Specific In-Kind Reserve Request Recommendation

Recommendation

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

Background

A retroactive waiver for in-kind services has been requested by a not-for-profit organization, Kiwanis Club of North Shore Miami Beach, Inc., for their "Charity Dog Show" scheduled for February 21, 2010.

In-kind services have been requested in an amount not to exceed \$750 from the Miami-Dade Park and Recreation Department for the use of a 16'X16' stage. This event will be funded from the unspent balance of the District 4 FY 2008-09 in-kind reserve fund.

In FY 2009-10, Kiwanis Club of North Shore Miami Beach, Inc., received no funding for this event.

Inkind02410