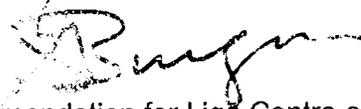


Date: April 6, 2010

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

Agenda Item No. 12(A)(2)

From: George M. Burgess
County Manager



Resolution No. R-417-10

Subject: In-Kind Services Recommendation for Liga Contra el Cancer, Inc.

RECOMMENDATION

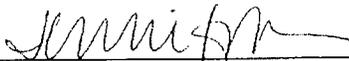
It is recommended that the Board approve the attached Resolution authorizing in-kind services for the Liga Contra el Cancer, Inc., in an amount totaling \$3,810.

BACKGROUND

An allocation for in-kind services has been requested by the Liga Contra el Cancer, Inc., for the "Third Annual Walk-a-Thon" event held on March 7, 2010.

In-kind services have been requested up to an amount not to exceed \$3,810 for County services. At the request of the Mayor, this event will be funded from the unspent balance of the Mayor's FY 2008-09 in-kind reserve fund.

In FY 2009-10, Liga Contra el Cancer, Inc., received \$122,500 from the General Fund to fund patients care services.



Jennifer Glazer-Moon
Special Assistant/Director, OSBM



MEMORANDUM
OFFICE OF THE MAYOR

DATE: April 6, 2010

TO: George M. Burgess
County Manager

FROM: Carlos Alvarez
Mayor

SUBJECT: In-Kind Reserve Request – Liga Contra el Cancer, Inc.

Attached is an application from Liga Contra el Cancer requesting in-kind services totaling \$3,810 for the "Third Annual Walk-a-Thon" event to be held on March 7, 2010. This request is for the use of County services.

I have approved the use of the Mayor's In-Kind Reserve to fund this request. Please place this item on the March 9, 2010 Budget, Planning and Sustainability Committee agenda for subsequent approval by the full Board of County Commissioners at one of their March 2010 meetings.

If you have any questions regarding this request, please contact my office at (305) 375-5071.

Attachments

c: Honorable Chairman Dennis C. Moss and Members,
Board of County Commissioners
Robert A. Cuevas, County Attorney
Diane Collins, Clerk of the Board
Eugene Love, Acting Director, Office of Agenda Coordination
Jennifer Glazer-Moon, Special Assistant/Director, Office of Strategic Business Management



MEMORANDUM

(Revised)

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

DATE: April 6, 2010

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

SUBJECT: Agenda Item No. 12(A)(2)

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. 12(A) (2)
4-6-10

RESOLUTION NO. R-417-10

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARKS AND RECREATION DEPARTMENT FOR THE MARCH 7, 2010 "THIRD ANNUAL WALK-A-THON" SPONSORED BY LIGA CONTRA EL CANCER, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$3,810.00 TO BE FUNDED FROM THE UNSPENT BALANCE OF THE MAYOR'S FY 2008-09 IN-KIND RESERVE FUND

WHEREAS, Liga Contra el Cancer, Inc. has requested in-kind services from the Miami-Dade Park and Recreation Department for the March 7, 2010 "Third Annual Walk-a-Thon" in an amount not to exceed \$3,810.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the objective of the "Third Annual Walk-a-Thon" is to seek funds to continue providing free cancer care to the poor and uninsured cancer patients in Miami-Dade County; and

WHEREAS, Liga Contra el Cancer, Inc. is a not-for-profit organization; and

WHEREAS, the "Third Annual Walk-a-Thon" is a small event, as defined in the attached Fee Waiver/In-kind Service Application, and \$3,810.00 shall be funded from the unspent balance of the Mayor's 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 Parks and Recreation Department for the March 7, 2010 "Third Annual Walk-a-Thon" in an amount not to exceed \$3,810.00 to be funded from the unspent balance of the Mayor's FY 2008-09 In-kind Reserve Fund.

The foregoing resolution was offered by Commissioner **Jose "Pepe" Diaz**, who moved its adoption. The motion was seconded by Commissioner **Dorrin D. Rolle** 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	absent
Carlos A. Gimenez	aye	Sally A. Heyman	aye
Barbara J. Jordan	aye	Joe A. Martinez	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 6th day April, 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.

GKS

Gerald K. Sanchez

S

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 80 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 Mr. Carlos Alvarez, Mayor of Miami-Dade

1. Full legal name of the requesting organization: Liga Contra el Cancer, 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.): _____

Adriana Cora, Executive Vice President

Liga Contra el Cancer, 2180 S.W. 12th Avenue, Miami, Florida 33129

(305) 856-4914 and acora@ligacontraelcancer.org

4. Specify fee waiver or in-kind service requested (quantity, if applicable): Liga Contra el Cancer requests the waiver of fees (\$3,809.00) associated with use of the Tropical

Park's stadium, at 7900 SW 40 St., Miami, FL. [REDACTED]

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5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): The event is Liga Contra el Cancer's Third Annual Walk-a-thon, to be held on Sunday, March 7, 2010, starting at 7:00AM to 5:00PM. The Walk-a-thon is the second mayor fund raiser event of the non-profit organization and the objective is to seek funds to continue providing FREE cancer care to the poor and uninsured cancer patients in Miami-Dade County.

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)): The event will be held at Tropical Park (stadium), 7900 SW 40 Street, Miami, Florida, which is located in Commissioner Javier Souto's District #10.

8. Description of regional or local impact: The fund raiser's impact and/or beneficiary will be the poor and uninsured cancer patients in Miami-Dade County who seek the League's FREE cancer care services.

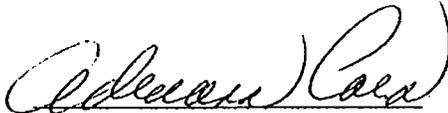
9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): The event's set-up will start on Saturday, March 6, 2010 at 11:00AM and breakdown is projected to end at 6:00PM on Sunday, March 7, 2010.

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

11. Expected number of participants and estimated attendance (per day, if applicable): The event is expecting, on Sunday, March 7, 2010, at least 1,500 participants (walkers), community leaders and volunteers.

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 attachment

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


Signature of Authorized Representative

1/19/2010
Date

Internal Revenue Service
District Director

Department of the Treasury

Date: MAR 13 1978

Employer Identification Number:

59-1629554

Accounting Period Ending:

June 30

Form 990 Required: Yes No

Person to Contact:

R. Wright

Contact Telephone Number:

(904) 791-2636

▷ Liga Contra El Cancer, Inc.
(League Against Cancer, Inc.)
1414 Coral Way
Miami, Florida 33145

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code.

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in section 509(a)(2).

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. Also, you should inform us of all changes in your name or address.

Generally, you are not liable for social security (FICA) taxes unless you file a waiver of exemption certificate as provided in the Federal Insurance Contributions Act. If you have paid FICA taxes without filing the waiver, you should contact us. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes. If you have any questions about excise, employment, or other Federal taxes, please let us know.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

The box checked in the heading of this letter shows whether you must file Form 990, Return of Organization Exempt from Income tax. If Yes is checked, you are required to file Form 990 only if your gross receipts each year are normally more than \$10,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. The law imposes a penalty of \$10 a day, up to a maximum of \$5,000, when a return is filed late, unless there is reasonable cause for the delay.

400 West Bay St., Jacksonville, Fla. 32202

(over)

Letter 947(DO) (5-7)

**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 (as shown on your income tax return) Liga Contra el Cancer, Inc.	
Business name, if different from above	
Check appropriate box: <input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ ----- <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.) 2180 SW 12 Avenue	Requester's name and address (optional)
City, state, and ZIP code Miami, Florida 33129	
List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. 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	
or	
Employer identification number	
59	1629554

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

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. citizen or other U.S. person (defined below).

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 ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

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.

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. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

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.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

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Consumer's Certificate of Exemption

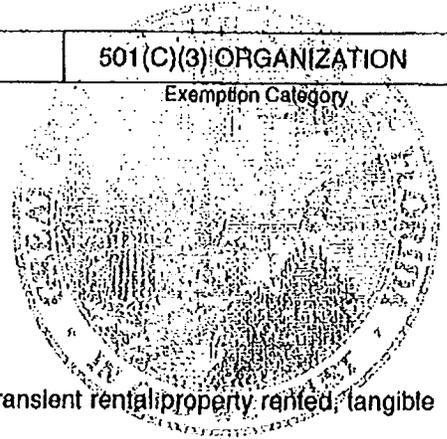
Issued Pursuant to Chapter 212, Florida Statutes

DR-14
R. 04/05
02/25/09

85-8012644544C-9	02/28/2009	02/28/2014	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

LIGA CONTRA EL CANCER INC
2180 SW 12TH AVE
MIAMI FL 33129-2615



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



Important Information for Exempt Organizations

DR-14
R. 04/05

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. 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 organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others by your organization of tangible personal property, sleeping accommodations or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, FAC).
5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third degree 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 Central Registration at 850-487-4130. The mailing address is PO BOX 6480, Tallahassee, FL 32314-6480.

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Gonzalez-Cao, Vivian (OSBM)

From: Byrnes, Timothy (MDPR)
Sent: Wednesday, February 03, 2010 12:08 PM
To: Gonzalez-Cao, Vivian (OSBM)
Cc: Gonzalez, Ana (MDPR); Morgan, Tom (MDPR); Zelenka, Maria (MDPR)
Subject: RE: La Liga Contra el Cancer event @ Tropical March 7, 2010
Attachments: LIGA CONTRA EL CANCER WALK MARCH 7 (2).doc

Vivian,
Please find the latest cost estimates for this event the group has not made a final decision on either an open stage (option # 1) or a showmobile (option # 2). We will try to make contact with them to see which direction they want to go, and get back to you,
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: Gonzalez-Cao, Vivian (OSBM)
Sent: Wednesday, February 03, 2010 11:48 AM
To: Byrnes, Timothy (MDPR)
Subject: La Liga Contra el Cancer event @ Tropical March 7, 2010

Hello Tim:
Please send me the estimate for the event.
Thanks,

Vivian Gonzalez-Cao, Business Analyst
Office of Strategic Business Management
111 NW 1 Street, 22 floor
Miami, FL 33128
Phone: (305) 375-4306
Fax: (305) 375-5168
Email: cvivi@miamidade.gov

"Delivering Excellence Every Day"

Miami-Dade County is a public entity subject to Chapter 119 of the Florida Statutes concerning public records. E-mail messages are covered under such laws and thus subject to disclosure. All E-mail sent and received is captured by our servers and kept as a public record.

LIGA CONTRA EL CANCER WALK MARCH 7, 2010 COST BREAKDOWN AS OF
01/19/10

FIXED COST:

▶ Stadium Track Rental	\$ 415.00
▶ Open Area Fee for 2,000 people (use of park roadways and walking paths)	\$1,030.00
▶ Staff Charges	
<input checked="" type="checkbox"/> Park Manager 5 at \$41.45 X 8hours X 18% fringe cost =	\$ 391.29
<input checked="" type="checkbox"/> Park Manager 3 at \$30.96 X 8hours X 18% fringe cost =	\$ 292.26
<input checked="" type="checkbox"/> AEO 1 at \$18.95 X 8hours X 18% fringe cost =	\$ 178.89
<input checked="" type="checkbox"/> Park Attendant at \$16.39 X 18% fringe cost =	\$ 154.72
<input checked="" type="checkbox"/> Park Service Aide at \$11.06 X 8hours X 18% fringe cost =	<u>\$ 104.41</u>
<input checked="" type="checkbox"/> Total Staff Charges	\$1,121.57
▶ Supply Cost 2 boxes of plastic trash liners at \$26.64 X 2 =	<u>\$ 53.28</u>
▶ Total Fixed Cost	\$1,618.95 \$2,618.95

OPTION # 1

▶ Stage Flat Open Stage 24' X 40'	
<input checked="" type="checkbox"/> Delivery, Set Up, Breakdown and Pick Up	\$ 350.00
<input checked="" type="checkbox"/> One day Rental	<u>\$ 440.00</u>
<input checked="" type="checkbox"/> Total Stage Rental Cost	\$ 790.00
▶ Generator 25KW Rental, one day	<u>\$ 400.00</u>
▶ Total Option # 1 Cost	\$1,190.00

OPTION # 2

▶ Showmobile Medium 27' X 16" X 42" from the ground Interior lights, back wall and partial roof	\$2,000.00
▶ Generator 25KW Rental, one day	<u>\$ 400.00</u>
▶ Total Option # 2 Cost	\$2,400.00

Rodriguez, Nadia (OSBM)

From: Byrnes, Timothy (MDPR)
Sent: Thursday, February 18, 2010 11:42 AM
To: Rodriguez, Nadia (OSBM)
Cc: Gonzalez, Ana (MDPR); Parrado, George (MDPR); Zelenka, Maria (MDPR); Seymour, Kesha (MDPR)
Subject: Liga Contra el Cancer Walk, Tropical Park 03/07/10

Nadia,

The long awaited decision has been made by the event committee, they are going with option # 1 for the flat open stage and generator, so your cost for the resolution will be as follows:

● Stadium rental	\$ 415.00
● Open Area Fee	\$1,030.00
● Staff Personnel	\$1,121.57
● Supply Cost	\$ 53.28
● Stage 24' X 40'	\$ 790.00
● Generator 25KW	\$ 400.00
● Total Cost	\$3,809.85

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
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