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CLERK OF THE BOARD
OF COUNTY COMMISSIONERS
MIAMI-DADE COUNTY, FLORIDA**

MEMORANDUM

Agenda Item No. 11(A) (39)

TO: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

DATE: October 4, 2011

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

SUBJECT: Resolution retroactively authorizing
in-kind services for the August 12,
2011 "Join a Mission" event
Resolution No. R-904-11

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Commissioner Barbara J. Jordan.



R. A. Cuevas, Jr.
County Attorney

RAC/cp

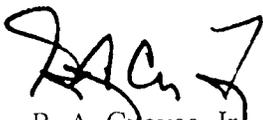


MEMORANDUM

(Revised)

TO: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

DATE: October 4, 2011

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

SUBJECT: Agenda Item No. 11(A)(39)

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

Agenda Item No. 11(A) (39)

Veto _____

10-4-11

Override _____

RESOLUTION NO. R-904-11 _____

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARK AND RECREATION DEPARTMENT FOR THE AUGUST 12, 2011 "JOIN A MISSION" SPONSORED BY NEXT LEVEL OF HOPE, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$790.00 TO BE FUNDED FROM THE UNSPENT BALANCE OF THE DISTRICT 1 FY 2008-09 IN-KIND RESERVE FUND

WHEREAS, Next Level of Hope, Inc. has requested in-kind services from the Miami-Dade Park and Recreation Department for the August 12, 2011 "Join a Mission" event in an amount not to exceed \$790.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the purpose of "Join a Mission" is to prepare students for the upcoming school year; and

WHEREAS, Next Level of Hope, Inc. is a not-for-profit organization; and

WHEREAS, the "Join a Mission" is a small event, as that term is defined on the attached Fee Waiver/In-kind Service Application, and \$790.00 of the in-kind services shall be funded from the unspent balance of the District 1 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 August 12, 2011 "Join a Mission" in an amount not to exceed \$790.00 to be funded from the unspent balance of the District 1 FY 2008-09 In-kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Barbara J. Jordan. It was offered by Commissioner **Rebeca Sosa**, who moved its adoption. The motion was seconded by Commissioner **Jean Monestime** and upon being put to a vote, the vote was as follows:

	Joe A. Martinez, Chairman	absent	
	Audrey M. Edmonson, Vice Chairwoman		aye
Bruno A. Barreiro	absent	Lynda Bell	aye
Esteban L. Bovo, Jr.	aye	Jose "Pepe" Diaz	aye
Sally A. Heyman	aye	Barbara J. Jordan	aye
Jean Monestime	aye	Dennis C. Moss	aye
Rebeca Sosa	aye	Sen. Javier D. Souto	aye
Xavier L. Suarez	aye		

The Chairperson thereupon declared the resolution duly passed and adopted this 4th day of October, 2011. 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: **Christopher Agrippa**
Deputy Clerk



Approved by County Attorney as
to form and legal sufficiency.

GKS

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 33129

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 Commissioner Barbara Jordan

1. Full legal name of the requesting organization: The Next Level of Hope, 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.): _____

Erik McCall

411 NW 117th Street Miami, FL 33168

Phone: 305.812.5542 Email: thenextlevelofhope@gmail.com

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

Stage

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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 event
J.A.M. or Join A Mission before the season is scheduled to take place
on August 6, 2011. The sole purpose of this annual event is to help prepare
students for the upcoming school and athletics (football) fiscal year and season,
by helping to create a more loving and learning environment needed for our youth
to succeed in/outside of their schools and parks. There are 3 missions which we
look to be the focus to get this atmosphere for our youth: 1) Crime Prevention
2) Health AND Fitness Awareness and 3). School Supply Preparation.

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)): _____
Miami Carol City Park
3201 NW 185th Street Miami, Fl. ~~33164~~ 33160
District: 1 - Commissioner Barbara Jordan

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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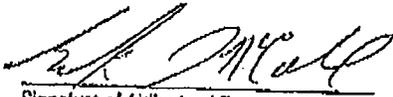
MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION
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10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable); _____

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.



Signature of Authorized Representative

7/8/11

Date

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No Events **No Name History**

Detail by Entity Name

Florida Non Profit Corporation

THE NEXT LEVEL OF HOPE, INC.

Filing Information

Document Number N08000010570
FEI/EIN Number 371575902
Date Filed 11/18/2008
State FL
Status ACTIVE

Principal Address

411 NW 117TH STREET
MIAMI FL 33168

Changed 04/30/2010

Mailing Address

411 NW 117TH STREET
MIAMI FL 33168

Changed 04/30/2010

Registered Agent Name & Address

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145 US

Officer/Director Detail

Name & Address

Title PD

MCCALL, ERIK C SR.
411 NW 117TH STREET
MIAMI FL 33168

Title PD

MARSHALL, COREY
3951 NW 175TH STREET
MIAMI FL 33055

Title SD

ROBERTS, DEBRA
4120 NW 187TH STREET
MIAMI FL 33055



**SHOWMOBILES, STAGES, BLEACHERS,
AND SOUND PRODUCTION**
(305) 226-8315 Ext. 221/(305) 553-8511 (Fax)

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: The Next Level of Hope, Inc

EQUIPMENT REQUESTED: Stage 24' x 40'

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Commissioner Barbara Jordan,
Commission District #1

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

BILLING ADDRESS/ZIP CODE: 111 NW 1st Street Suite 220 Miami, FL 33128

NAME/TITLE OF THE EVENT: The Next Level of Hope Book bag Giveaway 2011

ADDRESS OF EVENT: Jackson North Medical Health Center 16425 NW 25 Ave Miami, FL

TODAY'S DATE: 07/21/11 **DATE (S) & TIME OF EVENT:** 08/12/11 9AM – 11AM

SET-UP TIME & DAY: 9AM 08/12/11

TAKE-DOWN & DAY: 3PM 08/12/11

CONTACT PERSON/PHONE: Erik Mc Call 305-812-5542/Cory Marshall 786-838-8783
AT SITE CONTACT/CELL PHONE#: _____

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: \$790.00 In-kind District #1 **Signature:** _____

*(SEE FEE SCHEDULE FOR EXACT CHARGES) Tatiana Laroche
Agency/Group: Commission District #1

**CANCELLATIONS MUST BE MADE 72 HOURS IN ADVANCE OF THE
EVENT BY FAX OR EMAIL OTHERWISE EXPECT TO BE CHARGED
½ (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 (786) 236-7926**

Memorandum



Date: October 4, 2011

To: Honorable Chairman Joe A. Martinez
and Members, Board of County Commissioners

From: Carlos A. Gimenez
Mayor 

Subject: District Specific In-Kind Request Recommendation

Recommendation

The Office of Management and Budget (OMB) 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, Next Level of Hope, Inc., for their "Join a Mission" event held on August 12, 2011.

In-kind services have been requested in an amount not to exceed \$790 from the Miami-Dade Parks and Recreation Department for the use of stage. This event will be funded from the unspent balance of the District 1 FY 2008-09 in-kind reserve fund.

In FY 2010-11, Next Level of Hope, Inc., received no funding for this event.

Inkind011030