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

MEMORANDUM

Agenda Item No. 3(A)(11)

TO: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

DATE: April 2, 2013

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

SUBJECT: Resolution retroactively authorizing in-kind services for the February 9, 2013 "20 Year Anniversary Celebration" event
Resolution No. R-207-13

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Commissioner Dennis C. Moss.

R. A. Cuevas, Jr.
County Attorney

RAC/smm

/

MEMORANDUM
(Revised)

TO: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

DATE: April 2, 2013

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

SUBJECT: Agenda Item No. 3(A)(11)

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 Mayor'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. 3(A)(11)
4-2-13

RESOLUTION NO. R-207-13

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION, AND OPEN SPACES DEPARTMENT FOR THE FEBRUARY 9, 2013 "20 YEAR ANNIVERSARY CELEBRATION" EVENT SPONSORED BY GREATER MIAMI YOUTH FOR CHRIST, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED $650.00 TO BE FUNDED FROM THE BALANCE OF THE DISTRICT 9 FY 2012-13 IN-KIND RESERVE FUND

WHEREAS, the Greater Miami Youth For Christ, Inc. has requested in-kind services from the Parks, Recreation and Open Spaces Department for the February 9, 2013 "20 Year Anniversary Celebration" in an amount not to exceed $650.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, this event is a celebration of the twentieth anniversary of the KIX program which provides beneficial services to children in the Southwest Homestead/Florida City area; and

WHEREAS, The Greater Miami Youth For Christ, Inc. is a not-for-profit organization; and

WHEREAS, the "20 Year Anniversary Celebration" is a small event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and $650.00 of the in-kind services shall be funded from the balance of the District 9 FY 2012-13 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 Parks, Recreation and Open Spaces Department for the February 9, 2013 "20 Year Anniversary Celebration" sponsored by the Greater Miami Youth For Christ, Inc. in an amount not to exceed $650.00 to be funded from the balance of District 9 FY 2012-13 In-Kind Reserve Fund.

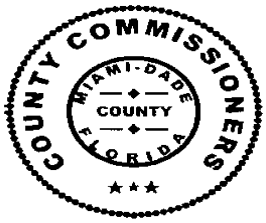
The Prime Sponsor of the foregoing resolution is Commissioner Dennis C. Moss. It was offered by Commissioner **José "Pepe" Diaz**, who moved its adoption. The motion was seconded by Commissioner **Sally A. Heyman** and upon being put to a vote, the vote was as follows:

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

The Chairperson thereupon declared the resolution duly passed and adopted this 2nd day of April, 2013. 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 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: Commissioner Moss

1. Full legal name of the requesting organization: Greater Miami Youth for Christ

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.):
   Stacy Morales, stacy@miamiyfc.com
   344 SW 4 Ave Homestead, FL 33030 (St Paul Missionary Baptist)
   305 962 4274

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

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries):

Greater Miami Youth for Christ KIX program
February 9, 2013 - 20 Year Anniversary Celebration
This event is a celebration of the KIX program in the southwest neighborhood for 20 years. Alumni, past & present volunteers & donors, current children & their families are coming together to celebrate our past & present the plan for our future.

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)):

344 SW 4 Ave, Homestead, Fl 33030

8. Description of regional or local impact:

Our hope is to impact the southwest Homestead area by providing hope, help, & wholeness to children ages 5-18 through holistic programs that nourish the body, mind, & soul. We provide consistent & positive programming that will improve educational status, future income potential, citizenship, health, & spiritual wholeness. We also provide jobs for 3-6 indigenous leaders.

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

Set up between 11-3
event 3:30-7
tear down - 7-8:30

10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): This event will feature children & teens from our program performing at 4 & 6pm. Guests will be given an opportunity to reflect & speak about the impact of KIX on their personal lives from the stage as well as an open mic time. The executive director will also speak about the future of KIX. Also there will be activities for children; bounce house, face painting, crafts.

11. Expected number of participants and estimated attendance (per day, if applicable): 150 200

12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): The estimated total budget for this event is $500 from GMYC as well as many donated items. $40 from Winn Dixie and food from parents and volunteers

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

Stacy Morales
Signature of Authorized Representative

2-8-13
Date

MIAMI-DADE PARKS

SHOWMOBILES, STAGES, BLEACHERS, AND SOUND PRODUCTION

(305) 226-8315 Ext. 221/(305) 553-8511 (Fax)

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: Greater Miami Youth for Christ's

EQUIPMENT REQUESTED: Stage 16' x 16'

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Commissioner Dennis Moss, Commission District #9

OR INDEX CODE (MIAMI-DADE AGENCIES ONLY):

BILLING ADDRESS/ZIP CODE:

NAME/TITLE OF THE EVENT: KIX Anniversary

ADDRESS OF EVENT: 344 SW 4 Ave

TODAY'S DATE: 02/8/13

DATE (S) & TIME OF EVENT: 02/9/13 3PM – 7PM

SET-UP TIME & DAY: 11AM 02/09/13

TAKE-DOWN & DAY: 7PM 02/09/13

CONTACT PERSON/PHONE: Stacy Morales 305-962-4274

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:** $650.00 In-kind District #9

*(SEE FEE SCHEDULE FOR EXACT CHARGES)

Signature: Commissioner Dennis Moss

Agency/Group: Commission District #9

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

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Detail by Entity Name

Florida Non Profit Corporation

GREATER MIAMI YOUTH FOR CHRIST INC

This detail screen does not contain information about the 2013 Annual Report.
Click the 'Search Now' button to determine if the 2013 Annual Report has been filed.

[Search Now]

Filing Information

Document Number	701315
FEI/EIN Number	596033466
Date Filed	08/15/1960
State	FL
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	12/23/2003
Event Effective Date	NONE

Principal Address

9350 SW 79TH AVENUE
MIAMI FL 33156

Changed 01/06/2011

Mailing Address

PO BOX 561101
MIAMI FL 33256 US

Changed 01/27/1997

Registered Agent Name & Address

ESKOLIN, NEIL
11405 SW 104TH COURT
MIAMI FL 33176 US

Name Changed: 01/06/2011

Address Changed: 01/06/2011

Officer/Director Detail

Name & Address

Title D

STOKES, PAUL M

In-Kind and CBO Application's
Office of Commissioner Dennis C. Moss

Document Checklist

☒ **Fee Waiver/In-Kind application** ☐ **Allocation (CBO)**

☒ Approved amount: $ 650.00

☒ Date of Event: 2/8/13

N/A ☐ Add to BCC MEMO: / N/A /
Only for CBO's

☒ E-mail Forms to organization

- ✓ Date e-mailed: Done
- ✓ Date received: Done.

☒ Completed application – Must be signed and dated

- ✓ Application forms
- ✓ W-9
- ✓ www.Sunbiz.com (Active)

☒ Request estimate from Parks and Complete Equipment Confirmation Form (In-Kind ONLY)

☒ Request for Resolution to be drafted (e-mail: Viviane Gonzalez Cao)

- ✓ Date: Feb 14, 2013

ONLY COMPLETE PACKAGES WILL BE ACCEPTED

CITY LIFE

Greater Miami Youth for Christ's KIX Program has existed for 20 years now with the aim of providing hope, help, and wholeness to youth in the South West Homestead/Florida City area. We do this in order to improve and enrich the lives of children from elementary through young adulthood with holistic programs that nourish the body, mind and soul. Our hope is to **impact the southwest community** by providing consistent and positive programming at all age levels that will improve educational status, future income potential, citizenship, health, and spiritual wholeness.

We recently received funding from the Children's Trust to take her program to 5 days a week and received a near perfect score in all areas. We are committed to turning the tide in the community from crime and poverty to healing and wholeness for the young people she serves and loves.

Since KIX's inception in 1993, literally hundreds of youth have graduated from high school and gone on to live productive lives because KIX challenged them to live a life of purpose and wholeness. Many of them are bringing their own children back to KIX to enjoy the same positive experience they had.

Currently, KIX has programming five days a week, which include:

- Homework and afterschool assistance
- Nutrition, physical, and literacy enrichment education
- Free summer camps for local youth
- Various service opportunities with local and national partners
- Overnight and short-term OASIS spring break camp, summer camps, and mission trips for middle and high school students
- Indigenous leader training program that hires and trains local leaders

We know our city desires to change the lives of young people in a positive manner, and to that end, we earnestly seek partnerships offering hope, help, and wholeness to South West Homestead.

On February 9, we are celebrating 20 years in this community by having our KIX Anniversary at our site. We are in the heart of the South West community at 344 SW 4 Ave. (St Paul Missionary Baptist Church). Our children will be signing and performing at this event and we would love to have a stage so that all of our visitors could see them! We are hoping that Commissioner Moss would be able to help us with this! We have room for a stage no bigger than 20 x 30. Please let me know if you have this available for our use on the above date.

Thank you for your time and interest in our young people's lives,

Stacy Morales
786-243-1600
KIX Executive Director
"Bringing hope, help, and wholeness to young people in Homestead."

YOUTH CHRIST®

Form **W-9**
(Rev. January 2011)
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 (as shown on your income tax return)

Business name/disregarded entity name, if different from above
Greater Miami Youth for Christ, Inc

Check appropriate box for federal tax classification (required): ☐ Individual/sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶

☐ Other (see instructions) ▶

☒ Exempt payee

Address (number, street, and apt. or suite no.)
9350 SW 79 Ave

Requester's name and address (optional)

City, state, and ZIP code
Miami, Fl 33156

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 the "Name" line 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.

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

Social security number
☐☐☐ - ☐☐ - ☐☐☐☐

Employer identification number
59 - 6033466

Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. 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 ▶ Stacy Morale Date ▶ 2-8-13

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:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. 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.

Memorandum

MIAMI-DADE COUNTY

Date: April 2, 2013

To: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

From: Carlos A. Gimenez
Mayor

Subject: District Specific In-Kind Request

A retroactive waiver for in-kind services has been requested by the Greater Miami Youth For Christ, Inc., for their "20 Year Anniversary Celebration" event held on February 9, 2013.

In-kind services have been requested in an amount not to exceed $650 from the Parks, Recreation and Open Spaces Department for the use of a 16 x 16 stage. This event will be funded from the balance of District 9 FY 2012-13 In-Kind Reserve Fund.

Edward Marquez
Deputy Mayor

Inkind01313