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

MEMORANDUM

Agenda Item No. 3(A)(2)

TO:	Honorable Chairwoman Rebeca Sosa and Members, Board of County Commissioners	**DATE:**	May 7, 2013
FROM:	R. A. Cuevas, Jr. County Attorney	**SUBJECT:**	Resolution retroactively authorizing in-kind services for the March 9, 2013 "Miami-Dade Walk to Cure Diabetes" Resolution No. R-306-13

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Vice Chair Lynda Bell.

R. A. Cuevas, Jr.
County Attorney

RAC/smm

MEMORANDUM
(Revised)

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

DATE: May 7, 2013

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

SUBJECT: Agenda Item No. 3(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 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)(2)
5-7-13

RESOLUTION NO. R-306-13

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE PARKS, RECREATION AND OPEN SPACES DEPARTMENT FOR THE MARCH 9, 2013 "MIAMI-DADE WALK TO CURE DIABETES" SPONSORED BY JDRF INTERNATIONAL INCORPORATED, A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED $1,750.00 TO BE FUNDED FROM THE BALANCE OF THE DISTRICT 8 FY 2012-13 IN-KIND RESERVE FUND

WHEREAS, JDRF International Incorporated South Florida Chapter has requested in-kind services from the Miami-Dade Parks, Recreation and Open Spaces Department for the March 9, 2013 "Miami-Dade Walk to Cure Diabetes" in an amount not to exceed $1,750.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the "Miami-Dade Walk to Cure Diabetes" will raise awareness regarding Type One Diabetes; and

WHEREAS, this event will also benefit those in South Florida impacted by Type One Diabetes by funding research to, among other things, find better treatments for Type One Diabetes; and

WHEREAS, JDRF International Incorporated South Florida Chapter is a not-for-profit organization; and

WHEREAS, the "Miami-Dade Walk to Cure Diabetes" is a special event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and $1,750.00 of the in-kind services shall be funded from the balance of the District 8 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 Miami-Dade Parks, Recreation and Open Spaces Department for the March 9, 2013 "Miami-Dade Walk to Cure Diabetes" sponsored by JDRF International Incorporated South Florida Chapter in an amount not to exceed $1,750.00 to be funded from the balance of District 8 FY 2012-13 In-Kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Vice Chair Lynda Bell. It was offered by Commissioner **Lynda Bell**, 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	**aye**	Esteban L. Bovo, Jr.	**aye**
Jose "Pepe" Diaz	**absent**	Audrey M. Edmonson	**aye**
Sally A. Heyman	**aye**	Barbara J. Jordan	**aye**
Jean Monestime	**absent**	Dennis C. Moss	**aye**
Sen. Javier D. Souto	**absent**	Xavier L. Suarez	**aye**
Juan C. Zapata	**absent**		

The Chairperson thereupon declared the resolution duly passed and adopted this 7th day of May, 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 VICE-CHAIR, COMMISSIONER BELL

1. Full legal name of the requesting organization: JDRF SOUTH FLORIDA CHAPTER

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.):
   MARY BETH FLECK, DEVELOPMENT MANAGER
   3411 NW 9th AVE, SUITE #701
   FT. LAUDERDALE, FL 33309

4. Specify fee waiver or in-kind service requested (quantify, if applicable):
   FEE WAIVER REQUESTED.
   SHOW MOBILE RENTAL $1,750.00 PER DAY

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

MIAMI-DADE WALK TO CURE DIABETES
SATURDAY, MARCH 9th at Zoo Miami
PURPOSE TO RAISE AWARENESS AND FUNDS
FOR TYPE ONE DIABETES (T1D).
BENEFICIARIES: ALL THOSE IN SOUTH FLORIDA IMPACTED
BY T1D – 90% OF THE PROCEEDS WILL SUPPORT RESEARCH
THAT ALLOWS JDRF TO FULFILL ITS MISSION IN FINDING A CURE,
BETTER TREATMENTS AND ULTIMATELY,
PREVENT T1D

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)):

ZOO MIAMI – THE GRASSLANDS MAIN EVENT AREA –
WALK IS THROUGH THE ZOO
ADDRESS: 12400 SW 152ND ST MIAMI, FL 33177

8. Description of regional or local impact:

IN THE PAST 12 YEARS, JDRF HAS FUNDED OVER $115M
OF RESEARCH IN FLORIDA ALONE – THIS RESEARCH
HAS CREATED BETTER TREATMENTS FOR THOSE
LIVING WITH T1D AND TO PREVENT LIFE-THREATENING
COMPLICATIONS.

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

SET-UP DELIVERY OF STAGE – 7AM
BREAKDOWN & REMOVAL OF STAGE – 12NOON
PLEASE SEE ATTACHED HOURLY EVENT SCHEDULE –
ATTACHMENT A

10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): PARTICIPANTS WILL BE DIRECTED TO ZOO MIAMI THEN PROVIDED WITH DIRECTIONAL SIGNS LEADING THEM TO THE GRASSLANDS – THE MAIN EVENT AREA
ATTACHMENTS B & C

11. Expected number of participants and estimated attendance (per day, if applicable): APPROXIMATELY 1500 PARTICIPANTS & APPROXIMATELY 500 ADD'L GUESTS IN ATTENDANCE

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

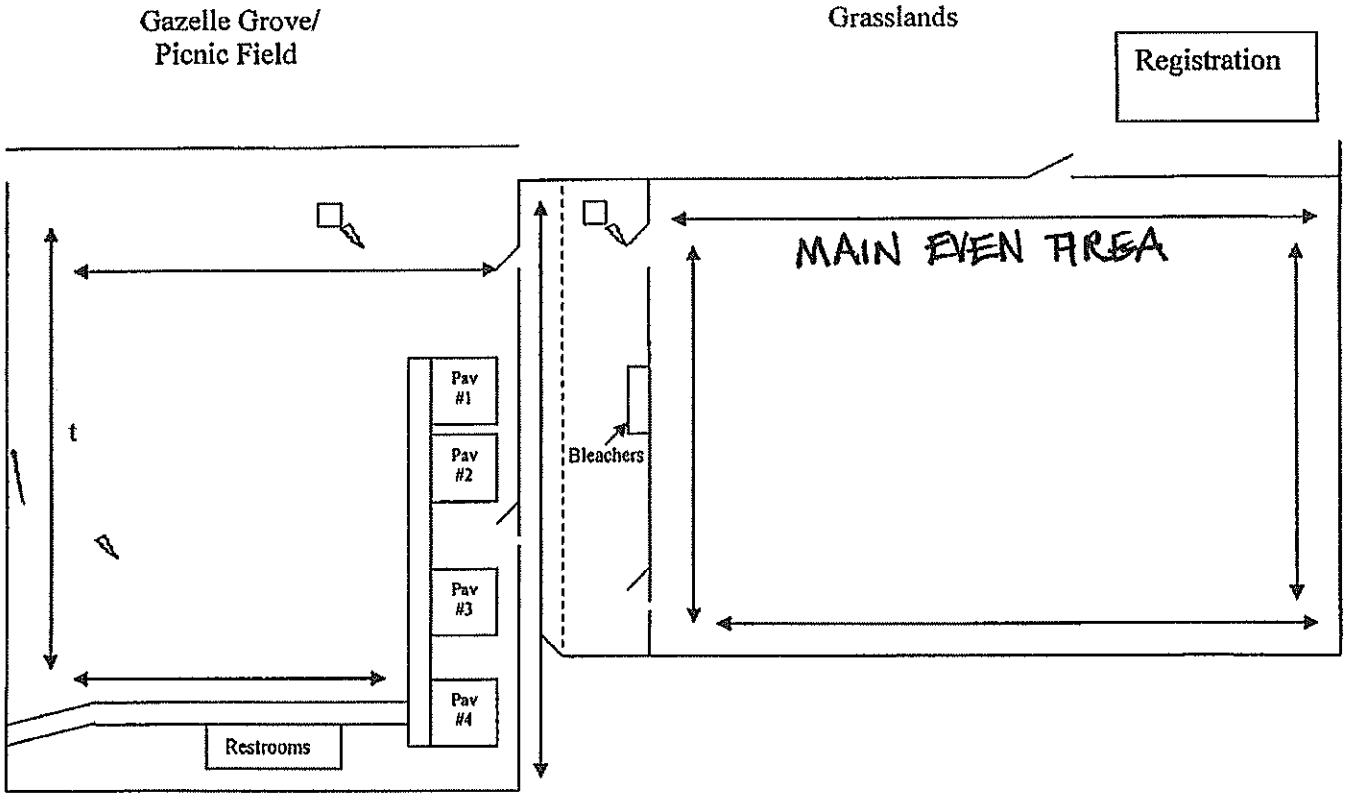
I hereby certify that all the statements made in this application are true and correct.

Mary Beth Fluch
Signature of Authorized Representative

2/28/13
Date

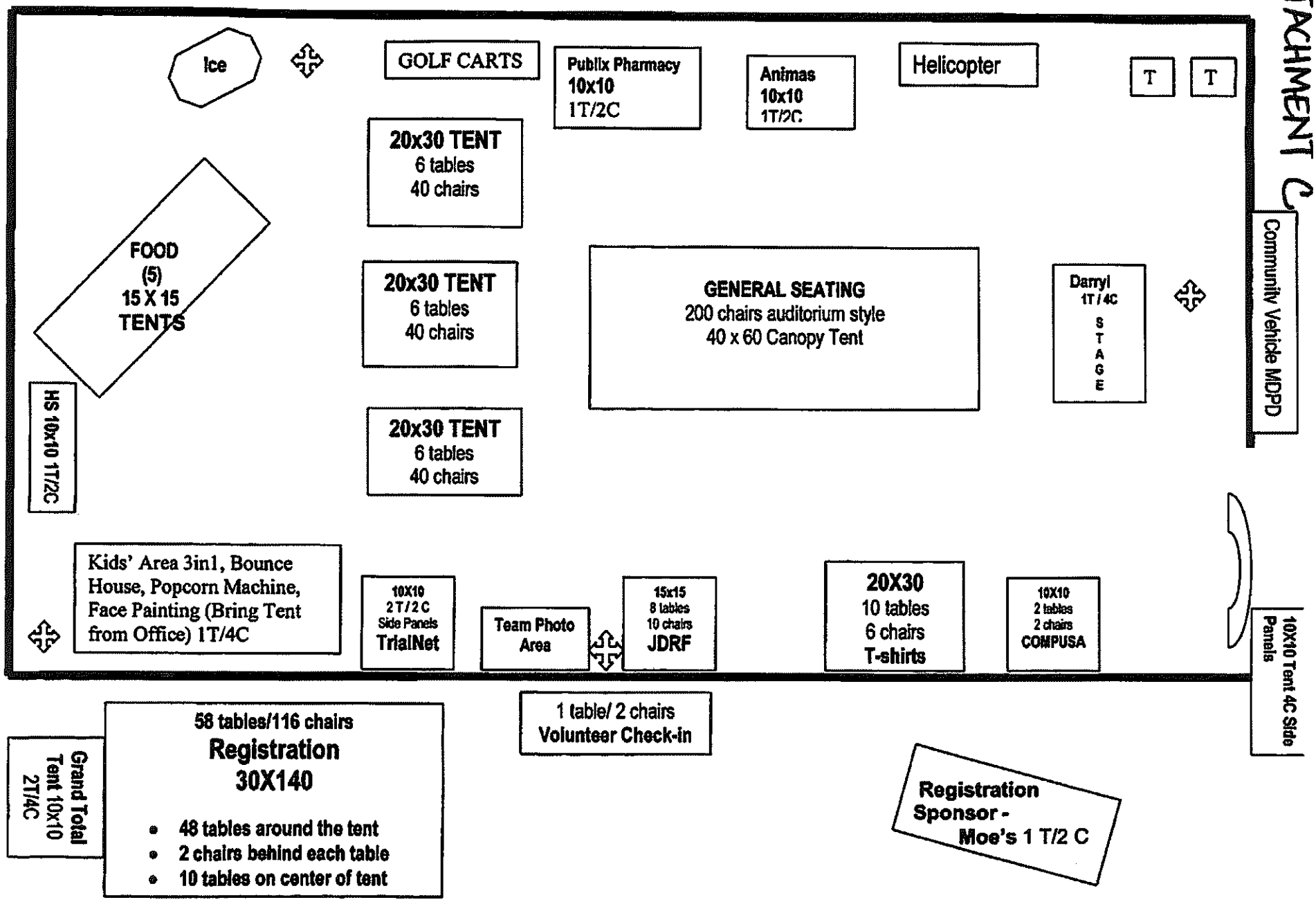
ATTACHMENT B

JDRF WALK TO CURE DIABETES
Zoo Miami
March 9, 2013 SATURDAY



2013 Miami-Dade Walk to Cure Diabetes

ATTACHMENT C



1 table/ 2 chairs
Volunteer Check-in

Registration
Sponsor -
Moe's 1 T/2 C

Grand Total
Tent 10x10
2T/4C

58 tables/116 chairs
Registration
30X140

- 48 tables around the tent
- 2 chairs behind each table
- 10 tables on center of tent

10

ATTACHMENT D

JDRF Juvenile Diabetes Research Foundation International

Juvenile Diabetes Research Foundation Int'l
Chapter Budget - Walk Event

Local

		FY 2013 Budget	Variance FY 2013 Budget to YTD Jun 2012 Amt	%
Walk Gross Revenue				
4102	Walk Corporate Teams	125,000	4,423	3.7%
4104	Walk Family Teams	152,000	23,932	18.7%
4106	Walk Cash Sponsorship	38,000	12,850	51.1%
4107	National Corp Partnerships & Walk S	0	(248)	-100.0%
4108	Walk Individuals	5,500	(1,058)	-16.1%
4110	Walk Matching Gifts	2,500	1,107	79.5%
4111	Walk Sneaker Sales National	133,976	22,428	20.1%
4112	Walk Sneaker Sales	500	339	210.6%
4113	Walk School Program	75,000	8,030	12.0%
4114	Walk Corporate Other Income	0	0	0.0%
4115	Walk Income Deposit Suspense (do n	0	0	0.0%
Total		532,476	71,803	13.1%
Walk Direct Benefit Expense				
6102	Walk Recruitment Event	0	0	0.0%
6104	Walk Family Team Workshop	2,250	(1,045)	-31.7%
6106	Walk Team Captains Kickoff	4,000	(1,285)	-24.3%
6108	Walk Day Food & Beverage	600	138	30.0%
6110	Walk Awards Reception	2,200	(314)	-12.5%
6112	Walk Plaques & Awards	767	751	4693.8%
6114	Walk Promotional Items	140	48	52.2%
6115	Walk Entertainment / Production	22,500	(783)	-3.4%
6116	Walk Walker Incentive Prizes	10,915	8,865	432.5%
6118	Walk T Shirt Expense	0	0	0.0%
6119	Walk Misc Direct expenses	0	0	0.0%
Total		43,372	6,375	16.5%
Walk Net Revenue		489,104	65,428	12.8%

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)
JUVENILE DIABETES RESEARCH FOUNDATION INT

Business name/disregarded entity name, if different from above

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.)
26 BROADWAY-14TH FLOOR

Requester's name and address (optional)

City, state, and ZIP code
NEW YORK, NY 10004

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
2 3 - 1 9 0 7 7 2 9

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 ▶ Mary Cuto Date ▶ 2/24/2011

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.

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Events Name History

Detail by FEI/EIN Number

Foreign Non Profit Corporation

JDRF INTERNATIONAL INCORPORATED

Filing Information

Document Number	833174
FEI/EIN Number	231907729
Date Filed	10/14/1974
State or Country	PA
Status	ACTIVE
Last Event	NAME CHANGE AMENDMENT
Event Date Filed	05/02/2012
Event Effective Date	NONE

Principal Address

26 BROADWAY
14 FLOOR
NEW YORK, NY 10004

Changed: 02/22/2010

Mailing Address

26 BROADWAY
14 FLOOR
NEW YORK, NY 10004

Changed: 02/22/2010

Registered Agent Name & Address

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

Name Changed: 05/28/2003

Address Changed: 05/28/2003

Officer/Director Detail

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Name & Address

Title PCEO

BREWER, JEFFREY
26 BROADWAY-14TH FLOOR
NEW YORK, NY 10004

Title Chairman

ALLEN, DICK
26 BROADWAY
14 FLOOR
NEW YORK, NY 10004

Title VP

BOSTICK, GERRI
26 BROADWAY-14TH FLOOR
NEW YORK, NY 10004

Title CFOA

SEBALD, EDWARD
2694 BIRCH AVE
EAST MEADOW, NY 11554

Annual Reports

Report Year	Filed Date
2011	01/04/2011
2012	01/04/2012
2013	01/31/2013

Document Images

01/31/2013 -- ANNUAL REPORT	View image in PDF format
05/02/2012 -- Name Change	View image in PDF format
01/04/2012 -- ANNUAL REPORT	View image in PDF format
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01/20/2009 -- ANNUAL REPORT	View image in PDF format
05/06/2008 -- ANNUAL REPORT	View image in PDF format
02/22/2007 -- ANNUAL REPORT	View image in PDF format
02/07/2006 -- ANNUAL REPORT	View image in PDF format
01/18/2005 -- ANNUAL REPORT	View image in PDF format
03/15/2004 -- ANNUAL REPORT	View image in PDF format
05/28/2003 -- Reg. Agent Change	View image in PDF format
01/27/2003 -- ANNUAL REPORT	View image in PDF format

03/24/2002 -- ANNUAL REPORT	View image in PDF format
12/10/2001 -- Name Change	View image in PDF format
08/07/2001 -- ANNUAL REPORT	View image in PDF format
04/26/2000 -- ANNUAL REPORT	View image in PDF format
05/12/1999 -- ANNUAL REPORT	View image in PDF format
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03/19/1997 -- ANNUAL REPORT	View image in PDF format
01/31/1996 -- ANNUAL REPORT	View image in PDF format
04/25/1995 -- ANNUAL REPORT	View image in PDF format

Events Name History

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State of Florida, Department of State

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Memorandum

MIAMI-DADE COUNTY

Date: May 7, 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 JDRF International Incorporated South Florida Chapter, for their "Miami-Dade Walk to Cure Diabetes" event held on March 9, 2013.

In-kind services have been requested in an amount not to exceed $1,750 from the Miami Dade Parks, Recreation and Open Spaces Department for the rental of a showmobile stage. This event will be funded from the balance of District 8 FY 2012-13 In-Kind Reserve Fund.

Edward Marquez
Deputy Mayor

Inkind01331