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

MEMORANDUM

Agenda Item No. 3(A)(4)

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

DATE: July 2, 2013

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

SUBJECT: Resolution retroactively authorizing In-Kind services for the April 13, 2013 South Dade YMCA Family Center Ribbon Cutting and Open House event
Resolution No. R-491-13

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/cp

MEMORANDUM

(Revised)

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

DATE: July 2, 2013

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

SUBJECT: Agenda Item No. 3(A)(4)

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)(4)
7-2-13

RESOLUTION NO. R-491-13

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE POLICE DEPARTMENT FOR THE APRIL 13, 2013 "SOUTH DADE YMCA FAMILY CENTER RIBBON CUTTING AND OPEN HOUSE" EVENT SPONSORED BY THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER MIAMI, INC. IN AN AMOUNT NOT TO EXCEED $627.10 TO BE FUNDED FROM THE BALANCE OF THE DISTRICT 8 FY 2012-13 IN-KIND RESERVE FUND

WHEREAS, the Young Men's Christian Association of Greater Miami, Inc. has requested in-kind services from the Miami-Dade Police Department for the April 13, 2013 "South Dade YMCA Family Center Ribbon Cutting and Open House " event in an amount not to exceed $627.10 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the purpose of the "South Dade YMCA Family Center Ribbon Cutting and Open House" event is to host an outing for the community and celebrate the grand opening of the YMCA; and

WHEREAS, participants will have the opportunity to enjoy local entertainment; and

WHEREAS, Young Men's Christian Association of Greater Miami, Inc. is a not-for-profit organization; and

WHEREAS, the "South Dade YMCA Family Center Ribbon Cutting and Open House" is a district event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and $627.10 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 Police Department for the April 13, 2013 "South Dade YMCA Family Center Ribbon Cutting and Open House" sponsored by the YMCA of Greater Miami, Inc. in an amount not to exceed $627.10 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 **Dennis C. Moss**, who moved its adoption. The motion was seconded by Commissioner **Xavier L. Suarez** 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.	**absent**
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 July, 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 Lynda Bell Commissioner District 8

1. Full legal name of the requesting organization: YMCA of Greater Miami

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.):
   Andy Weighill 305.969.7285 aweighill@ymcamiami.org
   9355 SW 134 Street
   Miami FL 33176

4. Specify fee waiver or in-kind service requested (quantify, if applicable): The YMCA of Greater Miami would like to request police presence for traffic and pedestrian safety for our Ribbon Cutting Ceremony/Grand Opening of our new South Dade YMCA Family Center. 2 officers for 5 hours each @ $65.22 per hr = $627.10

MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION
Page 2

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): South Dade YMCA Family Center – Ribbon Cutting & Open House April 13, 2013

Description & Purpose: The YMCA of Greater Miami, a cause-driven 501(c)3 nonprofit organization, is opening a new Family Center, in which we hope to triple our impact in the community. At this celebratory event we'll officially open our doors and thank the many donors who made this vision a reality.

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)): Commission District 8
South Dade YMCA Family Center
9355 SW 134 Street
Miami FL 33176

8. Description of regional or local impact:

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

MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION
Page 3

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.

Nadine Lewis
Signature of Authorized Representative

3-22-13
Date

Form **W-9**
(Rev. December 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)
The Young Mens Christian Association of Greater Miami, Inc.

Business name/disregarded entity name, if different from above
YMCA of Greater Miami

Check appropriate box for federal tax classification:
☐ 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.)
730 NW 107 Avenue, Suite 200

Requester's name and address (optional)

City, state, and ZIP code
Miami, FL 33172

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
5 9 - 0 6 2 4 4 6 4

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 ▶ David Bodner, CFO Date ▶ 3/22/2013

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.

FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

FAX

Date:	March 22, 2013	Pages Including cover:	5
To	Office of Strategic Business Management	From:	Nadine Lewis
Phone:	305-375-5143	Phone:	305-357-4000
Fax:	305-375-5168	Fax:	305-357-6632
		Company:	YMCA of Greater Miami – Human Resources & Risk Management
RE:	Fee Waiver / In-Kind Services Application &W-9		

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply

MESSAGE:

Please see attached.

YMCA of Greater Miami
Human Resources Department
730 NW 107 Avenue, Suite 200, Miami, FL 33172
P 305 357 4000 F 305 357 6632 www.ymcamiami.org

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Events Name History

Detail by FEI/EIN Number

Florida Non Profit Corporation

THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER MIAMI, INC.

Filing Information

Document Number	706855
FEI/EIN Number	590624464
Date Filed	02/20/1964
State or Country	FL
Status	ACTIVE
Last Event	AMENDED AND RESTATED ARTICLES
Event Date Filed	02/23/2009
Event Effective Date	NONE

Principal Address

730 NW 107 AVENUE
STE. 200
MIAMI, FL 33172

Changed: 01/25/2011

Mailing Address

730 NW 107 AVENUE
STE. 200
MIAMI, FL 33172

Changed: 01/25/2011

Registered Agent Name & Address

SANCHEZ, ALFRED
730 NW 107 AVENUE
STE. 200
MIAMI, FL 33172

Name Changed: 03/19/2009

Address Changed: 01/25/2011

Officer/Director Detail

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Name & Address

Title CEO

SANCHEZ, ALFRED
730 NW 107 AVE., STE 200
MIAMI, FL 33172

Title COO

GIMENEZ, STEVEN
730 NW 107 AVE., STE 200
MIAMI, FL 33172

Title CFO

BODNAR, DAVID
730 NW 107 AVE., ST. 200
MIAMI, FL 33172

Title C

NAPIER, LISA D
333 SE 2ND AVENUE, SUITE 3600
MIAMI, FL 33131

Title S

URQUIOLA, JOAQUIN
2121 PONCE DE LEON BLVD., 11TH FLOOR
MIAMI, FL 33134

Title T

GIBSON, ANTJE
1050 CARIBBEAN WAY
MIAMI, FL 33132

Annual Reports

Report Year	Filed Date
2011	05/23/2011
2012	02/06/2012

Document Images

07/12/2012 -- ANNUAL REPORT	View image in PDF format
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05/23/2011 -- ANNUAL REPORT	View image in PDF format
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02/23/2009 -- Amended and Restated Articles	View image in PDF format
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08/31/2005 -- REINSTATEMENT	View image in PDF format
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02/23/1999 -- ANNUAL REPORT	View image in PDF format
03/26/1998 -- ANNUAL REPORT	View image in PDF format
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06/20/1995 -- 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: July 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 Young Men's Christian Association of Greater Miami, Inc., for their "South Dade YMCA Family Center- Ribbon Cutting and Open House" event held on April 13th, 2013.

In-kind services have been requested in an amount not to exceed $627.10 from the Miami Dade Police Department for police services. This event will be funded from the balance of District 8 FY 2012-13 In-Kind Reserve Fund.

Edward Marquez
Deputy Mayor

Inkind01336