



MEMORANDUM

Agenda Item No. 11(A)(20)

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

DATE: June 5, 2012

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

SUBJECT: Resolution authorizing in-kind for the
June 24-30, 2012 "Camp Fun Rise"
event

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Commissioner Rebeca Sosa.



R. A. Cuevas, Jr.
County Attorney

RAC/cp



MEMORANDUM

(Revised)

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

DATE: June 5, 2012

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

SUBJECT: Agenda Item No. 11(A)(20)

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. 11(A)(20)
6-5-12

RESOLUTION NO. _____

RESOLUTION AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION, AND OPEN SPACES DEPARTMENT FOR THE JUNE 24-30, 2012 "CAMP FUN RISE" EVENT SPONSORED BY ARTHRITIS FOUNDATION, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$800.00 TO BE FUNDED FROM THE DISTRICT 6 FY 2011-12 IN-KIND RESERVE FUND

WHEREAS, Arthritis Foundation, Inc., has requested in-kind services from the Parks, Recreation, and Open Spaces Department for the June 24 - 30, 2012 "Camp Fun Rise" event in an amount not to exceed \$800.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the "Camp Fun Rise" event is designed especially for children who are suffering from arthritis; and

WHEREAS, Arthritis Foundation, Inc. is a not-for-profit organization; and

WHEREAS, the "Camp Fun Rise" event is a small event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and \$800.00 of the in-kind services shall be funded from the District 6 FY 2011-12 In-Kind Reserve Fund,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board authorizes in-kind services from the Parks, Recreation, and Open Spaces Department for the June 24-30, 2012 "Camp Fun Rise" event sponsored by Arthritis Foundation, Inc., in an amount not to exceed \$800.00 to be funded from the District 6 FY 2011-12 In-Kind Reserve Fund.

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

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

The Chairperson thereupon declared the resolution duly passed and adopted this 5th of June, 2012. 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: _____
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 Rebecca Sosa

1. Full legal name of the requesting organization: Arthritis Foundation, 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.): _____

Ingrid Velante
3405 N.W. 9th Ave, Ste 1206, Ft. Lauderdale, FL 33309
Velante@arthritis.org 305-873-6323 (Fax) 954-616-1232

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

800
A.D. Barnes Park Fee of \$1,800.00 for one
week of summer camp for children with Juvenile
arthritis.

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

CAMP Fun-Rise at A. D. Barnes Camp FROM June 24-30
This camp is designed especially for children that suffer from arthritis. It is often impossible for children with juvenile arthritis to participate in traditional summer camps. The camp is free of cost and staffed by pediatric rheumatologists nurses and other professionals with programs and activities designed especially for children with arthritis.

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)): _____

A.D. Barnes Leisure Access Center
3401 S.W. 72nd Avenue, Miami, FL 33155
District 6

8. Description of regional or local impact: _____

CAMP FunRise is open to all children with arthritis but due to the venue almost all campers are from the Miami area

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

CAMP starts Sunday June 24. Campers stay overnight for 6 nights / 7 days

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

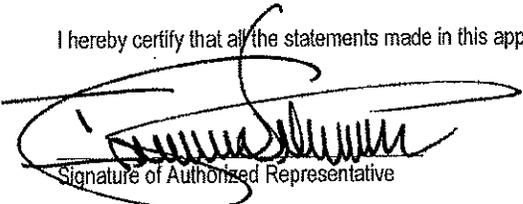
Leisure Access Center - Multi-purpose building
sleeping cabins and surrounding outdoor area.

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

24 children, 10 overnight staff and up to 15 day time
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): Please attachment

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


Signature of Authorized Representative

3/20/2012
Date

Ingrid Velarde, Director of Development

2012 Camp FunRise Budget

Camp FunRise Budget 2012	Expense	Proposed Budget	Description
opening day - family barbeque			
\$ 675.00			
	opening day food	\$ 625.00	125@ \$5.00 per
	decorations/supplies	\$ 50.00	
Camp site + Activities	site rental	\$ 1,500.00	AD Barnes Park weekly rental + 325.00 refundable deposit
\$ 2,965.20	tee-shirts	\$ 280.00	50@ 3.50 for campers; 30 @3.50 for staff/vois
	fire circle rental	\$ 90.00	camp fire program
	crafts & supplies	\$ 500.00	to supplement Childlife
	camper pictures	\$ 150.00	
	last night party decorations	\$ 75.00	
Food - 35 per meal	food - snacks	\$ 1,680.00	2 per day @ \$2.00 per x 12
\$ 6,055.00	food -breakfast	\$ 1,050.00	6 @ 5.00 per person for 35
	food - lunch	\$ 1,225.00	5 @ 7.00 per person for 35
	food - dinner	\$ 2,100.00	6 @10.00 per person for 35
Staff	camp director	\$ 1,000.00	

	staff gifts	\$ 300.00	6@ 50.00
\$ 1,500.00	cleaning lady	\$ 50.00	1 @ 50.00
	pre-camp meals	\$ 150.00	sat/sun lunches
Field Trips	dolphin swim	\$ 4,345.00	24 campers
\$ 5,499.06	staff lunch at dolphins	\$ 70.00	10@ \$7.00 per
	bus to key largo	\$ 400.00	estimate
	2nd field trip	\$ 1,000.00	bus included
\$ 16,694.26	TOTAL	\$16,640.00	



Miami-Dade County Park & Recreation Department
– Leisure Access Center/Parks Disability Services –
3401 SW 72 Avenue
Miami, FL 33155
(305) 665-5319/ Fax (305) 665-5992

ADULT DAY TRAINING...skills acquisition...community independence... community integration
NON-RESIDENTIAL HABILITATION...gross motor skills training...water safety training... communication skills...independent living skills...community independence... community integration

February 6, 2012

Attn: Susan Cuellar
Re: Camp Funrise/Arthritis Foundation 2012
Scuellar@arthritis.org

To whom it may concern:

We are writing to confirm the following dates have been reserved for your 2012 Camp Funrise to be held at Disability Services'-Leisure Access Center located at A.D. Barnes Park. You have requested to stay at the Leisure Access Center on the following dates: **Check in on:** June 24, 2012, Sunday @ Noon **Check out on:** June 30, 2012 Saturday @ Noon. The full amount will be due in order to secure these dates. The deposit is refundable (6-8 weeks) as long as the center is returned in the same condition as found. The rental amount due is: \$1,500.00 plus a deposit of \$350.00, for a grand total of **\$1,850.00**. Please provide us with a copy of your current tax exemption certificate; as the price above is calculated not including sales tax. The check is to be made out to Miami-Dade County Parks, please coordinate with Gisel Prado or Carolina Mugar at the above listed number to have the check delivered, contract signed and any further rental questions or arrangements needed.

As in years past I am happy to assist in anything possible.

Sincerely,

Mayra Santana

Mayra Santana
Account Clerk
Miami Dade County Parks
Disability Services

OGDEN UT 84201-0038

In reply refer to: 0437774131
Aug. 22, 2007 LTR 4167C EO
58-1341679 000000 00 000 R
00035470
BODC: TE

ARTHRTIS FOUNDATION INC
% ROBERT G MCKINNON
1330 W PEACHTREE ST NW STE 100
ATLANTA GA 30309-2943250

010100

Employer Identification Number: 58-1341679
Person to Contact: J. Reilly
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Aug. 06, 2007, request for information about your tax-exempt status.

Our records indicate that you were issued a determination letter in 1978, and that you are currently exempt under section 501(c)(3) of the Internal Revenue Code.

Based on the information supplied, we recognized the subordinates named on the list you submitted as exempt from Federal income tax under section 501(c)(3) of the Code.

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.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Deborah Bingham

Deborah Bingham
Accounts Management I

Memorandum



Date: June 5, 2012

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

From: Carlos A. Gimenez
Mayor

A handwritten signature in black ink, appearing to read "Carlos A. Gimenez".

Subject: District Specific In-Kind Request

A waiver for in-kind services has been requested by a non-for-profit, Arthritis Foundation, Inc., for their "Camp Fun Rise" event held on June 24 - 30, 2012.

In-kind services have been requested in an amount not to exceed \$800 from the Parks, Recreation, and Open Spaces Department for the use of the A.D. Barnes Park. This event will be funded from the District 6 FY 2011-12 In-Kind Reserve Fund.

A handwritten signature in black ink, appearing to read "Deputy Mayor".

Deputy Mayor

Inkind012013