

Memorandum



Date: April 16, 2013

To: Honorable Dennis C. Moss
Commissioner, District 9

From: Carlos A. Gimenez
Mayor 

Subject: Request for County Correspondence with Galata, Inc.

The following information is being provided in response to your request. Please find attached correspondence between Galata, Inc., a general fund-supported community-based organization, and the Grants Coordination Division of Office of Management and Budget (OMB).

The documents include:

- 1) OMB letter to Galata, Inc. dated March 1, 2013
- 2) Galata, Inc.'s response to said letter dated March 5, 2013, which attachments include:
 - o Engagement letter for financial services with Gancedo Accounting Solutions, Inc.
 - o Engagement letter with Hernandez & Tacoronte, P.A. for preparation of Galata's 2011 annual audit
 - o Galata, Inc.'s Organizational Chart
 - o City of Homestead Demolition Permit
 - o Agency-wide Budget for Fiscal Year 2012-13
 - o Subcontract with financial consultant (Halpern Consulting, LLC)
 - o Scopes of Service for Galata's five General Revenue contracts
 - o Budgets for Galata's five General Revenue contracts
 - o Budget narratives for Galata's five General Revenue contracts
 - o Certificate of Insurance
- 3) OMB Letter with Final Response to Galata, Inc. dated March 26, 2013

If you have any questions regarding these documents, please contact Daniel T. Wall, Assistant Director, Office of Management and Budget at 305-375-4742.

c: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners
Jennifer Moon, Director, Office of Management and Budget
Daniel T. Wall, Assistant Director, Office of Management and Budget

Attachments

Mayor06113



Office of Management and Budget
Grants Coordination
111 NW 1st Street
19th Floor
Miami, FL 33128
T 305-375-4742 F 305-375-4454

Carlos Gimenez, Mayor

March 1, 2013

Mr. Joseph G. Louis
Executive Director
Galata, Inc.
916 N. Flagler Avenue
Homestead, FL 33030

Dear Mr. Louis:

Thank you for making your staff available to meet with us this week to discuss several operational concerns that were noted by the Office of Management and Budget—Grants Coordination (OMB-GC) during and since the December 5, 2012 site visit to your agency. During the meeting, your staff agreed to address the following items, including the submission of independent, third party supporting documentation as appropriate:

- 1) Since at least November 2012, Galata, Inc. has been experiencing cash flow problems that prevent it from paying outstanding bills, including payroll and taxes. Therefore, please be advised that if any future contracts with this office are issued payment will be strictly based solely on reimbursements of documented expenditures. Further, your agency is reminded that County funds may not be used to pay any legal fees, late fees, interest, or penalties.
- 2) As the site of its five general revenue supported projects, the agency's property in Homestead has a mortgage with large principal and interests amounts outstanding. The agency has accrued significant late fees and penalties for failing to pay the mortgage as scheduled. Additionally, the agency's 2010 independent audit report indicates that the entire principal and interest on the mortgage -- an amount that exceeds \$300,000 -- will become due on June 02, 2013. As the agency's primary funding source, Miami-Dade County is concerned that County supported programs may be interrupted or discontinued due to delays in re-negotiating the mortgage or by foreclosure on the property. The agency must provide documentation confirming that it has a viable plan and sufficient resources to either satisfy these mortgage payment deadlines or otherwise secure a safe site for its programs deemed acceptable to the County including documentation of sufficient monetary resources to meet the financial obligations that it incurred throughout the past six months. The documentation may include financial reports, cost justifications, actual expenses and cost estimates, bank statements for all agency's accounts, documentation for current mortgage terms and conditions, bank guarantees, and lines of credit.
- 3) The proposed budgets and narratives submitted by Galata, Inc. to OMB-GC for the FY 2012-13 contract include mortgage expenses. In FY 2011-2012, OMB-GC staff advised the agency that mortgage payments represent an investment in real estate assets that create value that will be available in a future period. Such value is beyond the intent of

the annual general revenue awards that the County allocates to exclusively cover necessary program expenses for services delivered during the term of the agreement. The mortgage costs also carry considerable investment risks that are not covered under the County's general revenue award agreements. The agency must submit revised program budgets and corresponding narratives that exclude all mortgage related expenses.

- 4) The ongoing renovation of the agency's property in Homestead is still not completed, and the expected completion date is unknown. The delivery of program services from a site currently undergoing construction raises safety concerns. The agency must provide the County with confirmation of the current stage of the renovation, projected completion date, total costs, and sources of funds.
- 5) Galata, Inc.'s independent audit report for the year ending on 12/31/2010 identifies three material deficiencies: 1) **Inadequate Controls over the Preparation of Financial Statements**, 2) **Need to Review Accounting Transactions and Financial Reports**, and 3) **Need to Determine If Employees are Independent Contractors**. The agency must submit to the County documentation that confirms that corrective actions have been implemented to address those deficiencies.
- 6) The agency must provide a total agency-wide budget that completely discloses all past due debts, current expenses, and available revenue sources.
- 7) The agency must provide a current table of organization that identifies its management structure and those persons tasked with administrative and fiscal responsibilities (including grant reporting and compliance). The documentation must confirm the implementation of action plans and procedures for the agency's accounting functions. It should also indicate the adequacy of its fiscal staffing based on verification of skills, abilities, certifications, background, and credit checks.
- 8) Galata, Inc.'s independent audit report for the year ending on 12/31/2011 has yet to be submitted to OMB-GC. As cited in the agency's monitoring report, the submission of that report to the County was required no later than August 30, 2012. The agency must submit documentation from its current auditor that indicates the date when the audit will be available.
- 9) Due to the partial closure of the agency and suspension of service, Galata must provide the County with a plan to meet its expected service levels for the term of the FY 2012-13 contract.
- 10) The agency must submit a renewal certificate for its Workers Compensation Insurance, which expired on January 21, 2013 and which is required by the County's Risk Management Division.
- 11) The agency must provide documentation that confirms the active involvement of its Board of Directors in the administration and oversight of operations.

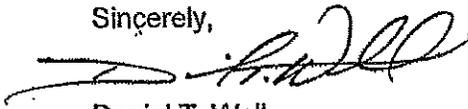
Please respond to the issues cited above by March 15, 2013. If Galata succeeds in properly addressing all of these issues in a manner deemed acceptable to the County, then OMB-

Mr. Joseph Louis
Page 3

GC will consider negotiating with the agency regarding the FY 2012-13 award through a cost based contract. The conversion is a management strategy that enables County staff to not only review all supporting documentation for expenditures and service performance on a monthly basis, but also – and most important – to identify any issues that could result in suspensions of your agency's funding in the future.

Please contact Felipe M. Rivero, III, Administrator of our Contracts and Grants Management Section, at 305-375-4765 if you have any additional questions regarding the items mentioned above.

Sincerely,



Daniel T. Wall
Assistant Director

C: Ms. Claire Canje, Chairperson of the Board
Jennifer Moon, Director, OMB



Intergenerational
Community Resource
Center

A 501(C)3 NON PROFIT
COMMUNITY BASED
ORGANIZATION
SERVING ELDERLY,
YOUTH AND FAMILIES

March 5, 2013

Mr. Daniel T. Wall
Assistant Director
Office of Management and Budget
Grants Coordination
111 NW 1st Street, 19th Flr.
Miami, FL 33128

Dear Mr. Wall,

We appreciate your hardwork and effort in ensuring that GALATA continues providing it's much needed services to the residents of South Miami Dade County. As you know, we are the only senior center south of Kendall Drive providing services free of charge to many needed elderly clients that would otherwise suffer if not receive these valuable services. Many of our families contact us daily wondering if the county understands the vital role GALATA plays in the life of the many clients we have proudly serve within the last thirteen years. Please find our responses below to your letter dated March 1, 2013.

1) Mortgage Issues

We are currently working on a presentation to Regions Bank Loan Workout Department to defer the pending balloon payment of June 2013. A financial projection is being compiled for the bank in order to justify restructuring the current mortgage. Both Mayor Bateman and Mayor Wallace have committed assisting us with negotiating with Region Bank. We are also contemplating leasing a portion of the building in order to generate additional revenues to cover the mortgage, and our last result is to rent a new location in order for us to continue providing the services until we resolve this issue with the bank.

2) County Mortgage Payments

Galata staff has begun working on reallocating the mortgage payment line item to other cost allocation and a new budget will be forth coming to your attention.

3) Renovations update

A contract has been sign and a demolition permit has been pulled by the new general contractor. (Included copy of the permit), awaiting for the City of Homestead to finalize reviewing of building plans and comments in order to pull the master construction permit. Estimated completion date is October 2013.

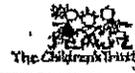
916 North Flagler Avenue
Homestead, Florida 33030

P.O. Box 901872
Homestead, FL 33090-1872

Office (305) 242-7060
Fax (305) 242-3040

www.galatainc.org

AN EQUAL OPPORTUNITY EMPLOYER FUNDED IN PART BY



4) Comments of FY 2010 audit report

4.1 Inadequate controls over preparation of financial statements

GALATA has since resolved this issue by contracting with an independent consultant accountant to work with bookkeeping staff monthly, to review financial records and check for accuracy and any issues. (Enclosed is the engagement letter from Mr. Halpern)

4.2 Need to review accounting transaction and financial reports

Since 2010, GALATA has worked with an accountant consultant in order to ensure in-depth review of our transaction and financial reports. To further ensure that these issues are not a problem in the future GALATA will contract with an accountant for more hours per month than was previously had.

4.3 Need to determine if employees are independent contractors

As of FY 2011, GALATA began deducting payroll taxes from its employees and corrected this issue.

5) Agency-wide budget

Still working on it

6) Table of Organization

We are adding a Deputy Director to oversee administration, fiscal, grant reporting and compliance. (Deputy Director Contract is attached) Please find attached a current copy of Galata's organizational structure with job descriptions.

7) FY 2011 Audit

Awaiting the engagement letter for from our auditors for FY 2011.

8) Plan of action to ensure expected service levels

GALATA was at full operation levels during October, November and December 2012. We never expected not to have a sign contract by the county, we received our closed out letter from OMB with no deficiencies for the fiscal year 2011-2012. This 6 months extended delayed has caught us by surprise. Our Case Managers will inform our client who has been with us over 12 years when we resume services. We will also work with the local radio stations to as well. Galata has been in operations since 2000, our issues have never been having enough clients to serve, but instead having enough resources to serve them.

We are confident that we will meet and exceed our expected level of service before the end of the contract year.

9) Workers Compensation Insurance

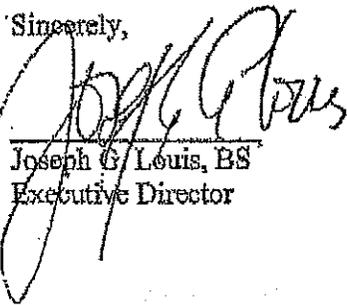
We will forward you a copy of our renewal certificate for workers compensation.

10) Active Board of Directors

A list of the Board of Directors is attached for your review. We are working with local leaders like Arturo Lopez from COFFO, Ms Ann Cumbie from Carrfour Support Housing Inc., Mayor Wallace from the City of Florida City to help us find strong board members to help us continue providing this much needed services to the residents of Miami Dade County.

If you have any questions, please feel free to contact myself or Luis A. Dilan at 305-242-7060.

Sincerely,



Joseph G. Louis, BS
Executive Director



August 21st 2012

Board of Directors/Executive Director
Galata Inc.
Mr. Joseph Louis

Dear Mr. Louis:

This letter is to confirm our understating of the terms and objectives of our engagement and the nature and limitations of the services we will provide.

We will perform the following services:

1. We will compile, from information you provide, the monthly balance sheets and related statements of income, retained earnings, and cash flows of Galata Inc. commencing August 22nd 2012, and will issue an accountant's report on such financial statements in accordance with the "compilation standards" as set forth in the Statements for Accounting and Review Services issued by the American Institute of Certified Public Accountants. The objective of a compilation is to assist you with presenting in the form of financial statement, information that is the representation of management without undertaking to express any assurance on the financial statements. We will not audit or review these financial statements. As a result of the work that our firm will perform, we will not be independent. The compilation letter will make reference to the lack of independence.
2. A compilation differs significantly from a review or an audit of financial statements. A compilation does not contemplate performing inquiry, analytical review procedures, or other procedures performed in a review. Consequently, the information provided by management will not be verified, corroborated, reviewed, or audited. Additionally, a compilation does not contemplate obtaining an understanding of the entity's internal control; assessing fraud risk; tests of accounting records by obtaining sufficient appropriate audit evidence through inspection, observation, confirmation, the examination of source documents (for example, canceled checks or bank images); or other procedures ordinarily performed in an audit. Therefore, a compilation does not provide a basis for expressing any level of assurance on the financial statements being compiled. Accordingly, no form of assurance will be given on the financial statements because we are performing our compilation work as accountants rather than as auditors. Galata Inc.. should not record or describe our services as an audit

1
11/15/13
[Signature]

Management is responsible for making all financial records and related information available to us.

We will be responsible for performing our services as outlined above in accordance with the "compilation standards" as set forth in the Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. If, for any reason, we are unable to complete the compilation of your financial statements, we will not issue a report on such statements as a result of this engagement.

Jose Gancedo CPA is the engagement partner for the compilation services specified in this letter. His responsibilities include supervising Gancedo Accounting Solutions Inc.'s services performed as part of this engagement.

As outlined in this letter, we will assist in the preparation of your financial statements and we may advise you about appropriate accounting principles and their application, but the final responsibility for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America remains with you. Also, as part of our engagement, we may propose standard, adjusting, or correcting journal entries to your financial statements. Management, however, has final responsibility for reviewing the proposed entries and understanding the nature and impact of the proposed entries to the financial statements. It is our understanding that management has designated qualified individuals with the necessary expertise, preferably within senior management, to be responsible and accountable for overseeing all the services performed as part of this engagement. By your signature below, you acknowledge that management agrees to evaluate the adequacy of, and accept responsibility for, the results of all the services performed as part of this agreement. In addition, you are responsible for establishing and maintaining internal controls, including monitoring ongoing activities. This includes designing, implementing and maintaining internal control relevant to the preparation and fair presentation of the financial statements; as well as identifying and ensuring that the organization complies with the laws and regulations applicable to its activities. We will have no responsibility to identify and communicate deficiencies in your internal control as part of this engagement.

Our engagement cannot be relied upon to disclose errors, fraudulent financial reporting, and misappropriation of assets, or illegal acts that may have occurred. However, we will inform the appropriate level of management of any material errors and of any evidence or information that comes to our attention during the performance of our engagement that fraud may have occurred. We will also report to the appropriate level of management any evidence or information that comes to our attention regarding illegal acts that may have occurred, unless they are clearly inconsequential. By your signature below, you understand and agree that you are responsible for preventing and detecting fraud.

Our consulting fees for this work will be of \$100 \$80 per hour. It is our mutual understanding that I will work as a consultant on a per need per hour basis. My work will generally consist of performing the following services and supervision of the Accounting Department:

- Accounts Receivables.
- Accounts Payables.
- Payroll.
- Cash Management.
- Cash Projections.
- Annual Budgets.
- Grant reporting, budgets and other compliance reports
- Bank Reconciliations
- Financial reports for management and or board use.
- Audit work papers, preparation and coordination of annual financial audit.
- Staff supervision, training and hiring.
- Computer accounting software evaluation and conversions.
- Implementation or verification of good internal controls in accordance with GAAP and GAS to safe guard assets, cash, property.

Payment for services is due when the services are rendered, and interim billings may be submitted as work progresses and expenses are incurred.

Billings become delinquent in not paid within 30 days of the invoice date. If billings are past due to excess of 30 days, we will stop all work until your account is brought current or withdraw from this engagement. Galata Inc. acknowledges and agrees that we are not required to continue work in the event of Galata Inc.'s failure to pay on a timely basis for service rendered as required by this engagement letter. Galata Inc. further acknowledges and agrees that in the event we stop work or withdraw from this engagement as a result of Galata Inc.'s failure to pay on a timely basis for services rendered as required by this engagement letter, we will not be liable to Galata Inc. for any damages that occur as a result of our ceasing to render services.

It is our policy to keep records related to this engagement for 3 years. However, Gancedo Accounting Solutions Inc. does not keep any original client records, se we will return those to you at the completion of the services rendered under this engagement. When records are returned to you it is your responsibility to retain and protect your records for possible future use, including potential examination by any government or regulatory agencies.

By your signature below, you acknowledge and agree that upon the expiration of the 3 year period Gancedo Accounting Solutions Inc. shall be free to destroy our records related to this engagement.

If any dispute arises among the parties hereto, the parties agree to first try in good faith to settle the dispute by mediation administrated by the American Arbitration Association under its Rules for Professional Accounting and Related Services Disputes before resorting to litigation. The costs of any mediation proceeding shall be shared equally by all parties.

Client and accountant both agree that any dispute over fees charged by the accountant to the client will be submitted for resolution by arbitration in accordance with the Rules for Professional Accounting and Related Services Disputes of the American Arbitration

Association. Such arbitration shall be binding and final. IN AGREEING TO ARBITRATION, WE BOTH ACKNOWLEDGE THAT, IN THE EVENT OF A DISPUTE OVER FEES CHARGED BY DECIDED IN A COURT OF LAW BEFORE A JUDGE OR JURY AND INSTEAD WE ARE ACCEPTING THE USE OF ARBITRATION FOR RESOLUTION.

We will be pleased to discuss this letter with you at any time.

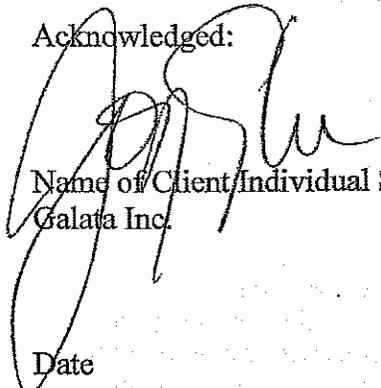
If the foregoing is in accordance with your understanding, please sign this letter in the space provided and return it to use.

Sincerely,

Jose Gancedo, C.P.A.

Jose Gancedo CPA.
Gancedo Accounting Inc.

Acknowledged:



Name of Client/Individual Signing Letter
Galata Inc.

Date



HERNANDEZ & TACORONTE, P.A.

Certified Public Accountants

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March 8, 2013

Board of Directors
Galata, Inc.
Homestead, Florida

We are pleased to confirm our understanding of the services we are to provide for Galata, Inc. as of December 31, 2011 and for the year then ended.

We will audit the financial statements of Galata, Inc. which comprise the balance sheet as of December 31, 2011, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements. Also, the supplementary schedule of expenditures of federal and other awards will be subjected to the auditing procedures applied in our audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, in accordance with auditing standards generally accepted in the United States of America, and our auditors' report will provide an opinion on it in relation to the financial statements.

Audit Objective

The objective of our audit is the expression of an opinion about whether your financial statements are presented fairly, in all material respects, in conformity with accounting principles generally accepted in the United States of America. Our audit will be conducted in accordance with auditing standards generally accepted in the United States of America and the provisions applicable to financial audits of Government Auditing Standards, promulgated by the U.S. Comptroller General and will include tests of your accounting records and other procedures we consider necessary to enable us to express such an opinion. If our opinion is other than unqualified, we will discuss the reasons with you in advance. If, for any reason, we are unable to complete the audit or are unable to form or have not formed an opinion, we may decline to express an opinion or to issue a report as a result of this engagement.

Audit Procedures

Our procedures will include tests of documentary evidence supporting the transactions recorded in the accounts and direct confirmation of certain assets and liabilities by correspondence with selected customers, creditors and financial institutions. We will also request written confirmation from your attorney as part of the engagement. At the conclusion of our audit, we will require certain representations from you about the financial statements and related matters.

An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, therefore, our audit will involve judgment about the transactions to be examined and the areas to be tested. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements. We will plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement, whether from (1) errors, (2) fraudulent financial reporting, (3) misappropriation of assets, or (4) violations of laws and governmental regulations that are attributable to the company or to acts by management or employees on behalf of the company.

Board of Directors
Galata, Inc.
Homestead, Florida

Because of the inherent limitations of an audit, combined with the inherent limitations of internal control, and because we will not perform a detailed examination of all transactions, there is a risk that material misstatements may exist and not be detected by us, even though the audit is properly planned and performed in accordance with auditing standards generally accepted in the United States of America. In addition, an audit is not designed to detect immaterial misstatements or violations of laws or governmental regulations that do not have a direct and material effect on the financial statements. However, we will inform you of any material errors that come to our attention, and we will inform you of any fraudulent financial reporting, or misappropriation of assets that come to our attention. We will also inform you of any violations of laws and governmental regulations that come to our attention, unless clearly inconsequential. Our responsibility as auditors is limited to the period covered by our audit and does not extend to any later periods for which we are not engaged as auditors.

Our audit will include obtaining an understanding of the entity and its environment, including internal control, sufficient to assess the risk of material misstatement of the financial statements and to design the nature, timing, and extent of further audit procedures. An audit is not designed to provide assurance on internal control or to identify deficiencies in internal control. However, during the audit, we will communicate to you and to those charged with governance any internal control related matters that are required to be communicated under professional standards.

Management Responsibilities

You are responsible for making all management decisions and performing all management functions; for designating an individual with suitable skill, knowledge, or experience to oversee the tax services and any other nonattest services we provided; and for evaluating the adequacy and results of those services and accepting responsibility for them.

You are responsible for establishing and maintaining internal controls, including monitoring ongoing activities; for selecting and applying accounting principles; and for the fair presentation in the financial statements of financial position, results of operations and cash flows in conformity with accounting principles generally accepted in the United States of America. You are responsible for making all financial records and related information available to us and for the accuracy and completeness of that information. You are also responsible for providing us with: (1) access to all information of which you are aware that is relevant to the preparation and fair presentation of the financial statements; (2) additional information that we may request for the purpose of the audit; and (3) unrestricted access to persons within the company from whom we determine it necessary to obtain audit evidence.

Your responsibilities include adjusting the financial statements to correct material misstatements and confirming to us in the management representation letter that the effects of any uncorrected misstatements aggregated by us during the current engagement and pertaining to the latest period presented are immaterial, both individually and in the aggregate, to the financial statements as a whole.

You are responsible for the design and implementation of programs and controls to prevent and detect fraud, and for informing us about all known or suspected fraud affecting the Company involving: (1) management, (2) employees who have significant roles in internal control, and (3) others where the fraud could have a material effect on the financial statements. Your responsibilities include informing us of your knowledge of any allegations of fraud or suspected fraud affecting the Company received in communications from employees, former employees, regulators, or others. In addition, you are responsible for identifying and ensuring that the Company complies with applicable laws and regulations.

Board of Directors
Galata, Inc.
Homestead, Florida

You are responsible for the preparation of the supplementary schedule of general and administrative expenses in conformity with accounting principles generally accepted in the United States of America. You agree to include our report on the supplementary information in any document that contains it, and indicates that we have reported on the supplementary information. You also agree to include the audited financial statements with any presentation of the supplementary information that includes our report thereon.

Engagement Administration, Fees and Other

We understand that your employees will prepare confirmation requests and will locate any documents selected by us for testing.

As required by Government Auditing Standards, we will retain the audit work papers for at least five years and, upon request, make them available to GAO or other government representatives, and provide photocopies, as necessary. As also required by Government Auditing Standards, enclosed is our most recent peer review report.

Miguel Hernandez is the engagement partner and is responsible for supervising the engagement and signing the report.

Our fees are estimated at \$8,000 for the services set forth in this letter and will be based upon our rates for this type of work. Our billings are payable upon presentation.

If you are in agreement with the terms of this letter, please sign below and return it for our files.

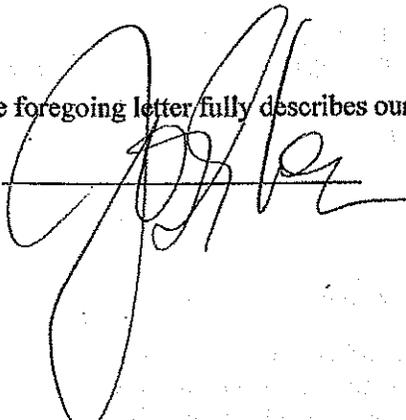
We appreciate this opportunity to continue to serve you.

Very truly yours,

Hernandez & Tacoronte, P.A.

The foregoing letter fully describes our understanding and is accepted by Galata, Inc.

By



Date

3/8/77

**Galata Organizational Chart
FY 2013**

Executive Director – Joseph G. Louis (PT)

Responsibilities Include overall agency fiscal and administration management, contract administration, human resources and policy/procedures

Deputy Director - Elou Fleurine, MBA (PT)

Responsibilities include grant/contract compliance and administration, staff management, program management

Project Manager – Luis Dilan (FT)

Construction Project administration, grant writing, fund raising

Marie K. Michel – Bookkeeper (FT)

Office administration, purchasing, A/P, A/R, data entry

Joseph Dorsinvil – Case Manager

Assisting clients, Medicaid, Medicare, Food Stamps

Yolanda Suckie – Elderly Services Coordinator

Administrating Senior Center, working directly with elderly clients

Jocelin Orisma – Bus Driver/Elderly

Transportation of elderly clients, client safety, maintaining bus maintenance schedule

(vacant) – After-School Coordinator

Administrating after school program, preparing lesson plans, homework assistance

(vacant) – Van Driver/After-School Program

Transportation of children to after-school program, safety, assist with after school program

rec. 3/15/13
BHL

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CITY OF HOMESTEAD
DEVELOPMENT SERVICES DEPARTMENT

790 North Homestead Blvd., Homestead, FL 33030 (305) 224-4500

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU MAKING A DOUBLE PAYMENT FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

..... Permit #: 13020446 Permit type: DEMOLITION
Master Permit#: APN/Folio: 10-7907-026-0060
Contractor: FLORIDA CONSTRUCTION & ENGINEER Phone: 305-883-7601
Permit Address: 916 N FLAGLER AVE
Subdivision: WOODLAWN ADD REV LT: 3,8 BLK: A
SQ FT: 0
Phone: 305-883-7601
Owner: GALATA INC
Address: 916 N FLAGLER AVE
Permit Desc: DEMO INTERIOR

VALUATION: \$600

PERMIT FEE: \$114.60

SUB PERMITS:

24-HOUR NOTICE REQUIRED FOR INSPECTIONS AND RESULTS

FOR INSPECTIONS: 305-224-4590 / www.cityofhomestead.com

This building permit hereby represents that all persons, firms, or corporations performing work under the permit hereby applied for have agreed to comply with and abide by each and every provision of the Florida Workmen's Compensation Act, Section 440, Florida Statutes, which may be applicable to the work to be performed under said permit.

A reinspection fee may be charged for each reinspection made due to the rejection of work, the work being incomplete at the time specified in the request for inspection, or failure to call for inspection. Payment of such fee must be made prior to the reinspection.

To transfer this permit, a notarized letter is required from the permit holder, and a completed application made by transferee as well as a Hold Harmless letter to the City of Homestead.

POSTING OF PERMIT: Work requiring a building permit shall not commence until the permit holder or his agent posts the building permit card in a conspicuous place on the front of the premises. The permit card shall be protected from the weather and located in such position by the permit holder until the Certificate of Occupancy is issued by the Building Official.

For further information contact the City of Homestead at the address below:

790 N. Homestead Blvd.
Homestead, Florida 33030
(305) 224-4500

Received 3/15/2013
BL

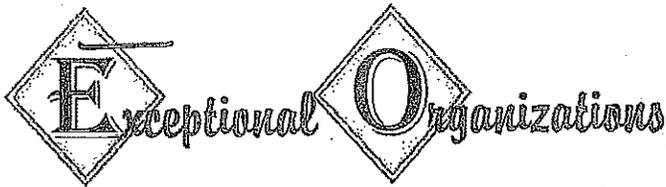
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Agency wide Budget

Accounting & Admin

	12-Oct	12-Nov	12-Dec	13-Jan	13-Feb	13-Mar	13-Apr	13-May	13-Jun	13-Jul	13-Aug	13-Sep	Total
Grants													
OCG 60+	\$ 3,333.33	\$ 3,333.33	\$ 3,333.33	\$ 3,333.00	\$ 3,333.00	\$ 3,333.00	\$ 3,333.00	\$ 3,333.00	\$ 3,333.00	\$ 3,333.00	\$ 3,333.00	\$ 3,333.00	\$ 39,997.00
OCG Senior Center	\$ 5,312.50	\$ 5,312.50	\$ 5,312.50	\$ 5,312.25	\$ 5,312.25	\$ 5,312.25	\$ 5,312.25	\$ 5,312.25	\$ 5,312.25	\$ 5,312.25	\$ 5,312.25	\$ 5,312.25	\$ 63,747.75
OCG ADAP/GCM	\$ 1,487.50	\$ 1,487.50	\$ 775.00	\$ 575.00	\$ 575.00	\$ 575.00	\$ 575.00	\$ 575.00	\$ 575.00	\$ 575.00	\$ 575.00	\$ 575.00	\$ 8,925.00
OCG STS	\$ 4,604.17	\$ 4,604.17	\$ 4,604.17	\$ 4,604.00	\$ 4,604.00	\$ 4,604.00	\$ 4,604.00	\$ 4,604.00	\$ 4,604.00	\$ 4,604.00	\$ 4,604.00	\$ 4,604.00	\$ 55,248.50
OCG LEAP	\$ 4,214.67	\$ 4,214.67	\$ 4,214.67	\$ 4,214.67	\$ 4,214.67	\$ 4,214.67	\$ 4,214.67	\$ 4,214.67	\$ 4,214.67	\$ 4,214.67	\$ 4,214.67	\$ 4,214.67	\$ 50,575.36
NSP Housing Program	\$ 1,450.00	\$ 1,450.00	\$ 1,450.00	\$ 1,450.00	\$ 1,450.00	\$ 1,450.00	\$ 1,450.00	\$ 1,450.00	\$ 1,450.00	\$ 1,450.00	\$ 1,450.00	\$ 1,450.00	\$ 17,400.00
CDBG grant	\$ 4,166.00	\$ 4,166.00	\$ 4,166.00	\$ 4,166.00	\$ 4,166.00	\$ 4,166.00	\$ 4,166.00	\$ 4,166.00	\$ 4,166.00	\$ 4,166.00	\$ 4,166.00	\$ 4,166.00	\$ 49,992.00
Total	\$ 24,568.17	\$ 24,568.17	\$ 23,855.67	\$ 23,654.92	\$ 23,654.25	\$ 285,885.61							
Program Expenses													
Field Trips	\$ 533.33	\$ 533.33	\$ 533.33	\$ 533.33	\$ 533.33	\$ 533.33	\$ 533.33	\$ 533.33	\$ 533.33	\$ 533.33	\$ 533.33	\$ 533.33	\$ 999.99
Transportation	\$ 762.00	\$ 762.00	\$ 762.00	\$ 762.00	\$ 762.00	\$ 762.00	\$ 762.00	\$ 762.00	\$ 762.00	\$ 762.00	\$ 762.00	\$ 762.00	\$ 6,399.96
Supplies	\$ 881.25	\$ 881.25	\$ 881.25	\$ 881.25	\$ 881.25	\$ 881.25	\$ 881.25	\$ 881.25	\$ 881.25	\$ 881.25	\$ 881.25	\$ 881.25	\$ 9,144.00
Accounting Services	\$ 2,176.58	\$ 2,176.58	\$ 2,176.58	\$ 2,176.58	\$ 2,176.58	\$ 2,509.91	\$ 2,509.91	\$ 2,509.91	\$ 2,176.58	\$ 2,176.58	\$ 2,176.58	\$ 2,176.58	\$ 10,575.00
Total	\$ 2,176.58	\$ 2,176.58	\$ 2,176.58	\$ 2,176.58	\$ 2,176.58	\$ 2,509.91	\$ 2,509.91	\$ 2,509.91	\$ 2,176.58	\$ 2,176.58	\$ 2,176.58	\$ 2,176.58	\$ 27,118.95
Admin Expenses													
Salaries	\$ 14,250.00	\$ 14,250.00	\$ 14,250.00	\$ 14,250.00	\$ 14,250.00	\$ 14,250.00	\$ 14,250.00	\$ 14,250.00	\$ 14,250.00	\$ 14,250.00	\$ 14,250.00	\$ 14,250.00	\$ 171,000.00
Fringe Benefits	\$ 1,762.00	\$ 1,762.00	\$ 1,762.00	\$ 1,762.00	\$ 1,762.00	\$ 1,762.00	\$ 1,762.00	\$ 1,762.00	\$ 1,762.00	\$ 1,762.00	\$ 1,762.00	\$ 1,762.00	\$ 21,144.00
Travel/Meetings/Per Diem	\$ 200.00	\$ 200.00	\$ 200.00	\$ 200.00	\$ 200.00	\$ 200.00	\$ 200.00	\$ 200.00	\$ 200.00	\$ 200.00	\$ 200.00	\$ 200.00	\$ 2,400.00
Education/Training	\$ 42.00	\$ 42.00	\$ 42.00	\$ 42.00	\$ 42.00	\$ 42.00	\$ 42.00	\$ 42.00	\$ 42.00	\$ 42.00	\$ 42.00	\$ 42.00	\$ 504.00
Communications & Utilities	\$ 931.25	\$ 931.25	\$ 931.25	\$ 931.25	\$ 931.25	\$ 931.25	\$ 931.25	\$ 931.25	\$ 931.25	\$ 931.25	\$ 931.25	\$ 931.25	\$ 11,175.00
Printing & Supplies	\$ 400.00	\$ 400.00	\$ 400.00	\$ 400.00	\$ 400.00	\$ 400.00	\$ 400.00	\$ 400.00	\$ 400.00	\$ 400.00	\$ 400.00	\$ 400.00	\$ 4,800.00
Advertising	\$ 900.00	\$ 900.00	\$ 900.00	\$ 900.00	\$ 900.00	\$ 900.00	\$ 900.00	\$ 900.00	\$ 900.00	\$ 900.00	\$ 900.00	\$ 900.00	\$ 10,800.00
Auto Insurance	\$ 879.00	\$ 879.00	\$ 879.00	\$ 879.00	\$ 879.00	\$ 879.00	\$ 879.00	\$ 879.00	\$ 879.00	\$ 879.00	\$ 879.00	\$ 879.00	\$ 10,548.00
Liability Insurance	\$ 500.00	\$ 500.00	\$ 500.00	\$ 500.00	\$ 500.00	\$ 500.00	\$ 500.00	\$ 500.00	\$ 500.00	\$ 500.00	\$ 500.00	\$ 500.00	\$ 6,000.00
Bldg Maintenance & Repair	\$ 2,700.00	\$ 2,700.00	\$ 2,700.00	\$ 2,700.00	\$ 2,700.00	\$ 2,700.00	\$ 2,700.00	\$ 2,700.00	\$ 2,700.00	\$ 2,700.00	\$ 2,700.00	\$ 2,700.00	\$ 32,400.00
Rent/Mortgage	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 7,500.00
Professional fees/Legal/Audit	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00	\$ 1,200.00
Other: Postage, Mailouts etc	\$ 37.00	\$ 37.00	\$ 37.00	\$ 37.00	\$ 37.00	\$ 37.00	\$ 37.00	\$ 37.00	\$ 37.00	\$ 37.00	\$ 37.00	\$ 37.00	\$ 444.00
ADT Security													
Total	\$ 23,326.25	\$ 23,326.25	\$ 23,326.25	\$ 23,326.25	\$ 23,326.25	\$ 23,326.25	\$ 23,326.25	\$ 23,326.25	\$ 23,326.25	\$ 23,326.25	\$ 23,326.25	\$ 23,326.25	\$ 279,915.00
Difference	\$ (934.66)	\$ (934.66)	\$ (1,647.16)	\$ (1,847.91)	\$ (1,847.91)	\$ (2,181.24)	\$ (2,181.24)	\$ (2,181.24)	\$ (1,847.91)	\$ (1,847.91)	\$ (1,847.91)	\$ (1,848.58)	\$ (21,148.34)

see 3/13/19



Empowering Organizations to Accomplish Their Mission

5320 S.W. 88th Court ♦ Miami, FL 33165

Telephone & Facsimile: 305-279-5337

Halpern@ExceptionalOrganizations.com

August 11, 2011

Joseph G. Louis, Executive Director
Galata, Inc.
916 N. Flagler Ave.
Homestead, FL 33030

response to 2010 audit.

Dear Mr. Louis:

This letter shall serve as a binding agreement between **Galata, Inc.** (client) and **Halpern Consulting, LLC** (consultant) for supervisory and mentoring CFO services as requested by client. Scope of services shall include, but not be limited to those outlined in the following paragraph.

Monthly Services

- Review transactions (disbursements and deposits)
- Review payrolls, including tax deposits and quarterly preparation of forms 941 and UCT-6
- Prepare any journal entries that may be required
- Review and assist with monthly bank reconciliations.
- Assist in the preparation and review of financial statements as requested

Additional Services

- Preparation of work papers and liaison with the independent audit
- Supervise the preparation of IRS forms W-2, W-3, 1099 and 1096

Consultant will not be involved or responsible for any communications with the IRS, State of Florida, Miami-Dade County, nor any other grantors. Consultant will follow the instructions of the Client as it pertains to payroll issues.

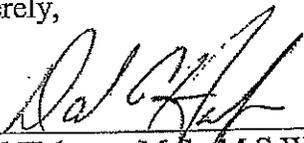
Within the agreed upon framework of services, consultant agrees to make no less than one site visit per month. Unlimited phone and email consultations are included.

This agreement is for one thousand five hundred dollars (\$1,500) and for a term of five months beginning Sept. 1, 2011 and concluding January 31, 2012. Consultant will submit monthly invoices of \$300, which shall be due in 15 days.

This agreement can be terminated by either party with thirty (30) days written notice.

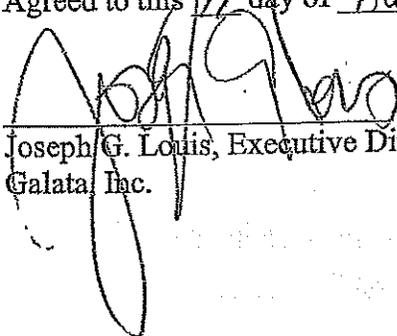
I look forward to hearing from you, and hope to be working with you shortly.

Sincerely,



David Halpern, M.S., M.S.W.
Halpern Consulting, LLC

Agreed to this 11 day of August, 2011



Joseph G. Louis, Executive Director
Galata, Inc.

ATTACHMENT A

17

+MIAMI-DADE COUNTY OFFICE OF GRANTS COORDINATION
CONTRACTS AND GRANT MANAGEMENT

SCOPE OF SERVICE NARRATIVE

American Dream

SECTION I: GENERAL INFORMATION

Name of Organization: GALATA, Inc.
Address: 916 N. Flagler Avenue Homestead, FL 33030
Program Contact Person: Gamael Nassar
Phone Number: 305-242-7060 Fax Number: 305-242-8040
E-mail Address: gn66@hotmail.com
Fiscal Contact Person: Joseph G. "Billy" Louis
Phone Number: 305-242-7060 Fax Number: (305) 242-8040
E-mail Address: galatainc@hotmail.com
Contract Amount: \$8,925 Contract Period: 10/01/2012 - 9/30/13

SECTION II: PROGRAM NARRATIVE

Descriptive Program Name: American Dream Achievement Project

Describe the program goals: GALATA's American Dream Achievement Project (ADAP) provides general information, direct assistance, or referrals concerning food stamps, health benefits, public transportation, housing, emergency assistance (rent/utility), immigration, legal services, translation, tax assistance, educational opportunities, and other services to help immigrants and new-entrants become self-sufficient.

Describe the program and services and how program funding will be used:
Funding from this contract will used to cover the partial cost for one (1) full-time case management salaries and program supplies.

SECTION III: PROFILE OF SERVICES
(INCLUDING EXPECTED LEVEL OF PERFORMANCE)

One hundred (100) participants will be enrolled in the program. Participants will receive case management and be linked to needed services throughout the year. Participants will receive appropriate medical services. Participants will also receive assistance with completing forms of government benefits, food stamps, special housing, etc. Participant will also receive free bus tokens where applicable. Participants will have access to community information regarding educational opportunities and job trainings.

REC
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AA

Unit Cost (Define the unit(s) of service and detail the unit cost(s) for the service):

The unit cost to serve one hundred (100) clients is \$89.25 per client (\$8,925/100 = \$89.25 per client).

Location of Service Site(s) and Hours of Service at each Site: (List all sites including the physical street address with zip codes and the hours of operation for each site):

Location: 916 North Flagler Avenue, Homestead, FL 33030

Office Hours: Monday – Friday 9:00 am – 6:00 pm.

SECTION IV: STATEMENT OF OBJECTIVES: (Define measurable and specific program objectives. Please quantify and note timeframe for completion of each objective [i.e., 75% of children attending after school tutoring program will increase their reading score by a full letter grade as measured by pre and post-testing during the contract year]).

Sixty (60%) of participants will be enrolled in and receive appropriate medical service referrals, and health, vision, and dental related educational materials as measured by the case management files.

Ninety (90%) of all participants that complete a random survey will report a high degree of satisfaction with program services.

Seventy-five (75%) participants will be linked to needed services

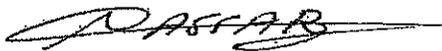
SECTION V: ORGANIZATIONAL SUPPORT ACTIVITIES

Describe how your organization will do outreach and public awareness of program activities:

GALATA's employees are dedicated to sharing our services with this community and actively recruit new clients through community presentations and events (i.e. health and information fairs, back-to-school events, etc.). GALATA maintains spots on a local radio station advertising our services. Finally, GALATA collaborates with agencies in our community and receive referrals from a database of over 100 partnering community based organizations.

SECTION VI: PERSONNEL

I understand that while this information represents a performance projection, I must receive approval from Miami-Dade Office of Grants Coordination prior to any operational or performance variations.



Signature and Title of Person Completing Form

Gamael Nassar, Deputy Director
Print Name and Title

**ATTACHMENT A
MIAMI-DADE COUNTY OFFICE OF GRANTS COORDINATION
CONTRACTS AND GRANT MANAGEMENT**

SCOPE OF SERVICE NARRATIVE

(Complete a separate form for every allocation identified in your organization's award letter)

SECTION I: GENERAL INFORMATION

Name of Organization: GALATA, Inc.

Address: 916 N. Flagler Avenue Homestead, FL 33030

Program Contact Person: Gamael Nassar

Phone Number: 305-242-7060 Fax Number: 305-242-8040

E-mail Address: gn66@hotmail.com

Fiscal Contact Person: Joseph G. "Billy" Louis

Phone Number: 305-242-7060 Fax Number: (305) 242-8040

E-mail Address: galatainc@hotmail.com

Contract Amount: \$50,575 Contract Period: 10/01/2012 – 09/30/13

SECTION II: PROGRAM NARRATIVE

Descriptive Program Name: Youth LEAP

Describe the program goals:

GALATA's Youth LEAP is an after school drop-in center for at least thirty (30) in-school middle and senior-high school youth. The goal is to create activities that will allow for the development of interpersonal skills, communication skills, positive social bonding, pro-social awareness and attitudes particularly in the area of leadership development, team building, conflict management, critical thinking skills, communication skills, study skills, and self-directed learning skills. Activities, provided mostly after-school and throughout the summer, will increase acculturation skills, develop techniques of conflict reduction, improve basic life skills, increase academic performance in schools, and prepare students for higher educational experiences as well as preparation for work experiences. Other goals include activities to prevent and reduce violence, substance abuse, and anti-social behavior.

Describe the program and services and how program funding will be used:

Funding from this contract will be used to hire one (1) part-time driver and two (2) part-time instructors. In addition to this, the contract will fund utilities, transportation costs, liability insurance, and other supplies.

**SECTION III: PROFILE OF SERVICES
(INCLUDING EXPECTED LEVEL OF PERFORMANCE)**

Thirty (30) youth between the ages of 11-21 years old will be recruited with emphases on recruiting more middle school students this fiscal year. 100% of youth will receive at least one of the services offered through this program. Services include Educational Workshops (life skills training, self-esteem workshops, etiquette and hygiene, health education, drug prevention, and leadership skills), Tutoring (homework assistance, FCAT preparation, and test-taking skills), and Transportation (daily the center from school and back home as well as on fieldtrips). Program Hours range Monday – Friday between 10:AM – 7:00 pm throughout the year.

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Unit Cost (Define the unit(s) of service and detail the unit cost(s) for the service):

The unit cost to provide services to thirty (30) clients is \$1,685 per client for the program period (\$50,575/30=\$1,685).

Location of Service Site(s) and Hours of Service at each Site: (List all sites including the physical street address with zip codes and the hours of operation for each site):

Location: 916 North Flagler Avenue, Homestead, FL 33030
Office Hours: Monday – Friday 9:00 am – 6:00 pm.

SECTION IV: STATEMENT OF OBJECTIVES: (Define measurable and specific program objectives. Please quantify and note timeframe for completion of each objective [i.e., 75% of children attending after school tutoring program will increase their reading score by a full letter grade as measured by pre and post-testing during the contract year]).

- Educational Workshops: 80% of participating youth who complete pre-post tests will show satisfaction with and increased knowledge in acculturation skills due to educational workshops.
- Tutoring: 100% of students will be able to access tutoring services during out-of-school hours (Mon – Fri 3pm – 7pm) measured by attendance log.
- Satisfaction Survey: 80% of participating youth will demonstrate a positive rating on a participant satisfaction survey.

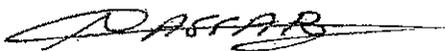
SECTION V: ORGANIZATIONAL SUPPORT ACTIVITIES

Describe how your organization will do outreach and public awareness of program activities:

GALATA's employees are dedicated to sharing our services with this community and actively recruit new clients through community presentations and events (i.e. health and information fairs, back-to-school events, etc.). GALATA maintains spots on a local radio station advertising our services. Finally, GALATA collaborates with agencies in our community and receive referrals from a database of over 100 partnering community based organizations.

SECTION VI: PERSONNEL

I understand that while this information represents a performance projection, I must receive approval from Miami-Dade Office of Grants Coordination prior to any operational or performance variations.



Signature and Title of Person Completing Form

Gamael Nassar, Deputy Director
Print Name and Title

**ATTACHMENT A
MIAMI-DADE COUNTY OFFICE OF GRANTS COORDINATION
CONTRACTS AND GRANT MANAGEMENT**

SCOPE OF SERVICE NARRATIVE

SECTION I: GENERAL INFORMATION

SECTION I: GENERAL INFORMATION

Name of Organization: GALATA, Inc.
Address: 916 N. Flagler Avenue Homestead, FL 33030
Program Contact Person: Gamael Nassar
Phone Number: 305-242-7060 Fax Number: 305-242-8040
E-mail Address: gn66@hotmail.com
Fiscal Contact Person: Joseph G. "Billy" Louis
Phone Number: 305-242-7060 Fax Number: (305) 242-8040
E-mail Address: galatainc@hotmail.com
Contract Amount: \$63,750 Contract Period: 10/01/2012 – 09/30/13

SECTION II: PROGRAM NARRATIVE

Descriptive Program Name: Adult Day Care

Describe the program goals:

The Adult Day Care Center provides recreational and educational activities in order to reduce loneliness and isolation for people ages 60 and older. Through the Adult Day Center Program clients will enjoy monthly field trips, regular shopping trips, self-enhancement workshops, access to our on-site computer lab, and Farm Share Food Assistance (Fruit, Vegetables, and Commodities). Social Services available to them will include, but not be limited to: counseling, general information, direct assistance, or referrals concerning food stamps, health benefits, public transportation, housing, emergency assistance (rent/utility), immigration, legal services, translation, elderly abuse awareness/prevention, tax preparation, educational opportunities etc.

Describe the program and services and how program funding will be used:

Funding from this contract will be used to hire an activity director, and two case managers. In addition to this, the contract will fund utilities, supplies and insurance throughout the contract period.

**SECTION III: PROFILE OF SERVICES
(INCLUDING EXPECTED LEVEL OF PERFORMANCE)**

Fifty (50) elderly clients over age 60 and older will be enrolled in the Adult Day Center. The Senior Center hours are Monday – Friday 9:00 am – 2:00 pm. Clients will also be assigned a case manager.

Unit Cost (Define the unit(s) of service and detail the unit cost(s) for the service):
The unit cost to serve fifty (50) clients is \$1,275 per client for the contract period (\$63,750/50=\$1,275).

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11/15/13

Location of Service Site(s) and Hours of Service at each Site:

Location: 916 North Flagler Avenue, Homestead, FL 33030

Office Hours: Monday – Friday 9:00 am – 6:00 pm.

SECTION IV: STATEMENT OF OBJECTIVES: (Define measurable and specific program objectives. Please quantify and note timeframe for completion of each objective [i.e., 75% of children attending after school tutoring program will increase their reading score by a full letter grade as measured by pre and post-testing during the contract year]).

Eighty (80%) of all participants that participate in a random survey will report a high degree of satisfaction with services.

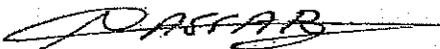
SECTION V: ORGANIZATIONAL SUPPORT ACTIVITIES

Describe how your organization will do outreach and public awareness of program activities:

GALATA's employees are dedicated to sharing our services with this community and actively recruit new clients through community presentations and events (i.e. health and information fairs, back-to-school events, etc.). GALATA maintains spots on a local radio station advertising our services. Finally, GALATA collaborates with agencies in our community and receive referrals from a database of over 100 partnering community based organizations.

SECTION VI: PERSONNEL

I understand that while this information represents a performance projection, I must receive approval from Miami-Dade Office of Grants Coordination prior to any operational or performance variations.



Signature and Title of Person Completing Form

Gamael Nassar, Deputy Director
Print Name and Title

**ATTACHMENT A
MIAMI-DADE COUNTY OFFICE OF GRANTS COORDINATION
CONTRACTS AND GRANT MANAGEMENT**

SCOPE OF SERVICE NARRATIVE

(Complete a separate form for every allocation identified in your organization's award letter)

SECTION I: GENERAL INFORMATION

Name of Organization: GALATA, Inc.

Address: 916 N. Flagler Avenue Homestead, FL 33030

Program Contact Person: Gamael Nassar

Phone Number: 305-242-7060 Fax Number: 305-242-8040

E-mail Address: gn66@hotmail.com

Fiscal Contact Person: Joseph G. "Billy" Louis

Phone Number: 305-242-7060 Fax Number: (305) 242-8040

E-mail Address: galatainc@hotmail.com

Contract Amount: \$55,250 Contract Period: 10/01/2012 – 09/30/13

SECTION II: PROGRAM NARRATIVE

Descriptive Program Name: Senior Transportation

Describe the program goals: GALATA, Inc. will provide free transportation services to elderly residents of deep-south Dade that are 60 years old and older through the Senior Transportation Program. This program provides transportation to and from the GALATA Adult Day Care Center, field trips, doctor's appointments, shopping trips, and other important appointment and/or events.

Describe the program and services and how program funding will be used:

Funding from this contract will used to fund a driver, activities director and a case manager. In addition to these costs, the contract will cover auto liability insurance, and accounting services.

**SECTION III: PROFILE OF SERVICES
(INCLUDING EXPECTED LEVEL OF PERFORMANCE)**

Annual workload measures (for each type of service to be provided including the number of clients to be served in the program) [i.e., 3 hours of after school care for twenty-five (25) children ages 5 – 10, one home delivered meal for 50 seniors every day (18,250 meals)]:

Seventy-two (72) elderly clients over age 60 will benefit from free transportation with 100% of clients getting round trip transportation to necessary area locations for medical, legal, shopping, and other appointments including daily transportation to and from the GALATA Adult Day Care Senior Center. Ten (10) clients over the ages of 60 will receive free monthly metro bus passes or tokens to allow them to ride public transportation free of charge for employment or other daily travel needs. GALATA will maintain an updated Coordination Fair Agreement with Miami-Dade transit.

*file
3/15/13*

Unit Cost (Define the unit(s) of service and detail the unit cost(s) for the service):

The unit cost to provide services to seventy-two (72) clients is \$767.36 per client (\$55,250/72) for the contract period.

Location of Service Site(s) and Hours of Service at each Site: (List all sites including the physical street address with zip codes and the hours of operation for each site):

Location: 916 North Flagler Avenue, Homestead, FL 33030
Office Hours: Monday – Friday 9:00 am – 6:00 pm.

SECTION IV: STATEMENT OF OBJECTIVES: (Define measurable and specific program objectives. Please quantify and note timeframe for completion of each objective [i.e., 75% of children attending after school tutoring program will increase their reading score by a full letter grade as measured by pre and post-testing during the contract year]).

Eighty (80%) of all participants that participate in a random survey will report a high degree of satisfaction with transportation services

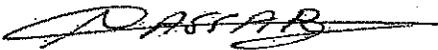
SECTION V: ORGANIZATIONAL SUPPORT ACTIVITIES

Describe how your organization will do outreach and public awareness of program activities:

GALATA's employees are dedicated to sharing our services with this community and actively recruit new clients through community presentations and events (i.e. health and information fairs, back-to-school events, etc.). GALATA maintains spots on a local radio station advertising our services. Finally, GALATA collaborates with agencies in our community and receive referrals from a database of over 100 partnering community based organizations.

SECTION VI: PERSONNEL

I understand that while this information represents a performance projection, I must receive approval from Miami-Dade Office of Grants Coordination prior to any operational or performance variations.



Signature and Title of Person Completing Form

Gamael Nassar, Deputy Director
Print Name and Title

ATTACHMENT A

**MIAMI-DADE COUNTY OFFICE OF GRANTS COORDINATION
CONTRACTS AND GRANT MANAGEMENT**

SCOPE OF SERVICE NARRATIVE

SECTION I: GENERAL INFORMATION

Name of Organization: GALATA, Inc.

Address: 916 N. Flagler Avenue Homestead, FL 33030

Program Contact Person: Gamael Nassar

Phone Number: 305-242-7060 Fax Number: 305-242-8040

E-mail Address: gn66@hotmail.com

Fiscal Contact Person: Joseph G. "Billy" Louis

Phone Number: 305-242-7060 Fax Number: (305) 242-8040 /

E-mail Address: galatainc@hotmail.com

Contract Amount: \$40,000 Contract Period: 10/01/2012 – 09/30/13

SECTION II: PROGRAM NARRATIVE

Descriptive Program Name: Senior Center: 60+ Bridging the Gap

Describe the program goals:

The Senior Center: 60+ Bridging the Gap is dedicated to assisting elderly residents of deep south Miami-Dade County with assistance in securing needed services.

Describe the program and services and how program funding will be used:

Funding from this contract will be used to fund two case managers. In addition to these costs, the contract will fund equipment, office and program supplies over a twelve month period.

**SECTION III: PROFILE OF SERVICES
(INCLUDING EXPECTED LEVEL OF PERFORMANCE)**

Fifty (50) elderly clients over age 60 will be enrolled in the Senior Center: 60+ Bridging the Gap Program. Case Managers assist clients in English, Spanish, or Creole by screening them for benefits and assisting them in applying for the benefits that they qualify for (i.e. food stamps, social security, golden passports, Medicaid, Medicare, etc.)

MLL
3/15/13

Unit Cost (Define the unit(s) of service and detail the unit cost(s) for the service):

The unit cost to serve fifty (50) clients is \$800 per client (\$40,000/50 = \$800 per client).

Location of Service Site(s) and Hours of Service at each Site

Location: 916 North Flagler Avenue, Homestead, FL 33030

Office Hours: Monday – Friday 9:00 am – 6:00 pm.

SECTION IV: STATEMENT OF OBJECTIVES: (Define measurable and specific program objectives. Please quantify and note timeframe for completion of each objective [i.e., 75% of children attending after school tutoring program will increase their reading score by a full letter grade as measured by pre and post-testing during the contract year]).

Eighty (80%) of clients that participate in a random survey will report a high degree of satisfaction with services.

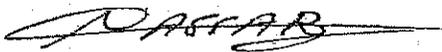
SECTION V: ORGANIZATIONAL SUPPORT ACTIVITIES

Describe how your organization will do outreach and public awareness of program activities:

GALATA's employees are dedicated to sharing our services with this community and actively recruit new clients through community presentations and events (i.e. health and information fairs, back-to-school events, etc.). GALATA maintains spots on a local radio station advertising our services. Finally, GALATA collaborates with agencies in our community and receive referrals from a database of over 100 partnering community based organizations.

SECTION VI: PERSONNEL

I understand that while this information represents a performance projection, I must receive approval from Miami-Dade Office of Grants Coordination prior to any operational or performance variations.



Signature and Title of Person Completing Form

Gamael Nassar, MBA Deputy Director
Print Name and Title

CHRONAL BUDGET
 BUDGET IDENTIFICATION #
 BUDGET FISCAL YEAR

LINE ITEM BUDGET FORM

Organization Name
 GALATA, Inc.

Program Name
 Adult Day Care / Senior Center - A

Date
 10/1/2012

Budget Period
 Oct. 1, 2012 - Sept. 30, 2013

Object Class Categories	Total Cost to Agency by Revenue Source					TOTAL I - V	Total Cost to Agency For Each Line Item For the Budget Period	I / TOTAL % of Total Charged to This Award
	This Award	All Other	Federal Total	City/State Total	All Other Total			
DIRECT COSTS:	County Funding	County Funding	Federal Funding	City/State Funding	Other Funding			
Personnel								
1. Position Case Manager / Book Keeper	7,500	22,500				30,000	25%	
Fringes Kerna Michel 15%	1,125	3,375				4,500	25%	
2. Position Activities Director Y Suckle	10,000	4,000				14,000	71%	
Fringes 15%	1,500	600				2,100	71%	
3. Position Case Manager J Dors	10,000	15,500				25,500	39%	
Fringes 15%	1,500	2,325				3,825	39%	
4. Position Fringes								
5. Position Fringes								
General Liability & Insurance costs	3,000	7,550.00				10,550.00	28%	
Transportation	2,000	4,400.00				6,400.00	31%	
Supplies	7,850	1,300.00				9,150.00	85%	
Telephone	1,000	2,700.00				3,700.00	27%	
Contractual Accounting Services	7,775	2,800.00				10,575.00	74%	
Other Direct Costs Subcontract								
Mortgage Annual			2,000			20,740	0%	
Utilities	3,000	4,475.00				7,475	40%	
INDIRECT COSTS:								
Personnel								
1. Position Fringes								
2. Position Fringes								
Audit	7,500.00					7,500.00	100%	
Indirect Costs (describe in narrative)	63,750	63,750	73,525			20,740	158,015	

Requested By: Joseph G. Louis, Executive Director
 Executive Director / Agency Designee Name

Approved By: Pressa Mondellus
 Board President / Vice President Name

Executive Director / Agency Designee Signature
 Date 3/14/2013

Board President / Vice President Signature
 Date 3/14/2013

Reviewed By: OMB Contracts Officer Signature
 Date

Approved By: OMB Contracts & Grants Administrator Signature
 Date

Fiscal Approval (if needed)
 Accountant:
 Supervisor:

Handwritten initials and date: JGL 3/15/13

Handwritten number: 8

Organization Name: GALATA, Inc.

Program Name: Special Transportation Project - B

Budget Period: Oct 1, 2012 - Sept 30, 2013

Object-Class Categories	Total Cost to Agency by Revenue Source					TOTAL I - V	I / TOTAL	
	County Funding	All Other County Funding	Federal Total	City/State Total	All Other Total			
1. Position	Case Manager - J Dors	15,800	10,000			25,800	61%	
Fringes		15%	1,500			3,825	61%	
2. Position	Driver - O Jocelin	19,500				19,500	100%	
Fringes		15%	2,925			2,925	100%	
3. Position	Activities Director Y Stuckie	4,000	10,000			14,000	29%	
Fringes		15%	600	1,500		2,100	29%	
4. Position								
Fringes								
5. Position								
Fringes								
6. Position								
Fringes								
Transportation		2,400	4,000			6,400	39%	
Supplies								
Contractual Services - Accounting Services		2,900	7,775			10,575	26%	
General Liability and Insurances		2,500	8,050			10,550	24%	
Mortgage Annual								
Utilities		1,500	5,975			7,475	20%	
Telephone		1,200	2,500			3,700	32%	
INDIRECT COSTS:								
Personnel								
1. Position								
Fringes								
2. Position								
Fringes								
Indirect Costs (describe in narrative)								
Indirect Costs (describe in narrative)								
TOTAL AWARD:	\$ 55,250	\$ 51,300	\$ -	\$ -	\$ -	\$ 106,550		

Requested By: Joseph G. Lolis, Executive Director
 Executive Director / Agency Designee Name

Approved By: Pressa Mondalis
 Board President / Vice President Name

Executive Director / Agency Designee Signature
 Date: 3/14/2013

Board President / Vice President Signature
 Date: 3/14/2013

Reviewed By: OMB Contracts Officer Signature
 Date

Approved By: OMB Contracts & Grants Administrator Signature
 Date

Fiscal Approval (if needed)
 Accountant
 Supervisor

1001

Organizational Name: GALATA, Inc

Program Name: Youth LEAP - C

Object Class Categories	Total Cost to Agency by Revenue Source					TOTAL I - V	I / TOTAL
	This Award	County All Other	Federal Total	City/State Total	All Other Total		
DIRECT COSTS:	County Funding	County Funding	Federal Funding	City/State Funding	Other Funding	Total Cost to Agency Of Each Line Item For the Budget Period	% of Total Percent of Total Charged to This Award
Personnel							
1. Position	Instructors - youth - New	\$ 10,000				\$ 10,000	100%
Fringes		15%				\$ 1,500	100%
2. Position	Instructors - youth - New	\$ 10,000				\$ 10,000	100%
Fringes		15%				\$ 1,500	100%
3. Position	Youth Driver - R Morel	\$ 14,000				\$ 14,000	100%
Fringes		15%				\$ 2,100	100%
4. Position							
Fringes							
5. Position							
Fringes							
6. Position							
Fringes							
7. Position							
Fringes							
Supplies (describe in narrative)		\$ 2,000	\$ 4,400			\$ 6,400	31%
Equipment (describe in narrative)		\$ 1,000	\$ 8,150			\$ 9,150	11%
Contractual Services - Subcontracts		\$ -	\$ -			\$ -	
Contractual Services - Accounting Services		\$ -	\$ -			\$ -	
General Liability and Insurance		\$ 3,000	\$ 7,550			\$ 10,550	26%
Field Trips		\$ 1,000				\$ 1,000	100%
Other Directo Costs							
Building Mortgage							
Utilities		\$ 2,975	\$ 4,500			\$ 7,475	40%
Telephone		\$ 1,500	\$ 2,200			\$ 3,700	41%
INDIRECT COSTS:							
Personnel							
1. Position							
Fringes							
2. Position							
Fringes							
Indirect Costs (describe in narrative)							
Indirect Costs (describe in narrative)							
TOTAL AWARD:		\$ 60,575	\$ 26,800	\$ -	\$ -	\$ 87,375	

Requested By: Joseph G. Lohler Executive Director
 Executive Director / Agency Designee Name
 Executive Director / Agency Designee Signature
 Date: 3/14/2013

Approved By: Prassa Mondelius
 Board President / Vice President Name
 Board President / Vice President Signature
 Date: 3/14/2013

Reviewed By: OMB Contracts Officer Signature
 Date

Approved By: OMB Contracts & Grants Administrator Signature
 Date

Fiscal Approval (if needed)
 Accountant
 Supervisor

MLL
 3/16/13

Subject: Resource: 11
 Subject: Contract: 22

LINE ITEM BUDGET FORM

Date: 10/1/2012
 Budget Period: Oct. 1, 2012 - Sept. 30, 2013

Organization Name: GALATA, Inc.

Program Name: 60+ Bridging the Gap - D

Object Class Categories	I		II		III		IV		V		TOTAL: I - V	I / TOTAL % of Total Percent of Total Charged to This Award
	This Award County Funding	County	All Other County Funding	Federal Total	City/State Total	All Other Total	Other Funding	Total Cost to Agency Of Each Line Item For the Budget Period				

Personnel												
1. Position	Case Manager / Book Keeper	\$ 15,000	\$ 15,000								\$ 30,000	50%
Fringes	Kerna Michel 15%	\$ 2,250	\$ 2,250								\$ 4,500	50%
2. Position	Case Manager - A Gerra	\$ 18,000	\$ 18,000								\$ 18,000	100%
Fringes	15%	\$ 2,700	\$ 2,700								\$ 2,700	100%
3. Position												
Fringes												
4. Position												
Fringes												
5. Position												
Fringes												
6. Position												
Fringes												
7. Position												
Fringes												
General Liability and Insurances		\$ 2,050	\$ 2,050	\$ 6,500							\$ 10,550	19%
Mortgage through June 2012												
Mortgage Annual												
Contractual Services - Subcontracts												
Contractual Services - Accounting Services												
Other Direct Costs - Building Mortgage		\$ -	\$ -								\$ -	
INDIRECT COSTS												
Personnel												
1. Position												
Fringes												
2. Position												
Fringes												
Indirect Costs (describe in narrative)												
Indirect Costs (describe in narrative)												
40000	TOTAL AWARD:	\$ 40,000	\$ 40,000	\$ 25,750	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 95,750	

Requested By: Joseph G. Kohn, Executive Director
 Executive Director / Agency Designee Name

Approved By: Prassa Mondelis
 Board President / Vice President Name

Date: 3/14/2013

Reviewed By: [Signature]
 OMB Contracts Officer Signature

Approved By: [Signature]
 OMB Contracts & Grants Administrator

Date: 3/14/2013

Fiscal Approval (if needed)
 Accountant:
 Supervisor:

3/15/13

Organization Name
GALATA, Inc.

Program Name
American Dream Achievement Project - E

Budget Period
Oct. 1, 2012 - Sept. 30, 2013

Object Class Categories	Total Cost to Agency by Revenue Source					TOTAL: I - V	I / TOTAL
	County This Award	All Other County Funding	Federal Total	City/State Total	All Other Total		
Personnel	7,500	22,500				30,000	25%
1. Position	Case Manager / Book Keeper						
Fringes	1,125	3,375				4,500	25%
2. Position	Kerna Michel 15%						
Fringes							
3. Position							
Fringes							
4. Position							
Fringes							
5. Position							
Fringes							
6. Position							
Fringes							
7. Position							
Fringes							
Supplies							
Equipment (describe in narrative)							
Contractual Services (describe in narrative)							
Other Direct Costs (Subcontract)							
Other Direct Costs (describe in narrative)							
Other Direct Costs (describe in narrative)							
Other Direct Costs (describe in narrative)							
INDIRECT COSTS							
Personnel							
1. Position							
Fringes							
2. Position							
Fringes							
Indirect Costs (describe in narrative)							
Indirect Costs (describe in narrative)							
TOTAL AWARD:	\$ 8,925	\$ 8,925	\$ 34,725	\$ -	\$ -	\$ 43,850	

Requested By: Joseph G. Nolis, Executive Director
Executive Director Agency Designee Name
Executive Director Agency Designee Signature
Date: 3/14/2013

Approved By: Pressa Mondelius
Board President / Vice President Name
Board President / Vice President Signature
Date: 3/14/2013

Reviewed By: OMB Contracts Officer Signature

Approved By: OMB Contracts & Grants Administrator

Fiscal Approval (if needed)
Accountant:
Supervisor:

3/15/13

GALATA, Inc.
American Dream Achievement Project - E
Budget Narrative
October 1, 2012 – September 30, 2013

Categories

FY2012-13

I. Direct Costs

Personnel

- 25% of the annual salary for one FT Case Manager/Book Keeper (Kerna Michel)
- **\$7,500**
- Fringe benefits to include FICA/MICA, Ins. and WC at 15% of the salary. 25% of the fringe cost is allocated to this grant or **\$1,125**

Center Supplies – supplies and materials in providing the delivery of services, activities, meals, education, and other direct services to the amount of **\$300**, or 3% of the total supplies cost of \$9,150.

TOTAL BUDGET

\$8,925

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GALATA, Inc.
Youth LEAP – Youth Crime Prevention - C
Budget Narrative
October 1, 2012 – September 30, 2013

Categories

FY2012-13

I. Direct Costs

Personnel: Total \$39,100 = Salaries+ Fringes

- 100% of 1 PT instructor salary at \$10,000 each (TBA)
- 100% of 1 PT instructor salary at \$10,000 each (TBA)
- Duties: Responsible for organizing activities, supervising staff, preparing reports, supervising students.
- Fringe benefits at 15% of salary to include FICA/MICA, Ins. and WC – at \$1,500
- Fringe benefits at 15% of salary to include FICA/MICA, Ins. and WC.– at \$1,500
- 100% of the PT Driver R. Morel for youth programming - **\$14,000**
- Fringe benefits at 15% of salary to include FICA/MICA, Ins. and WC. - **\$2,100**

Transportation for clients, vehicle maintenance, and fuel costs @ 30% = **\$2,000** of the total cost annually. 2004 Ford Econoline Van (12 passenger), (2) pick up runs (local schools) (2) drop off runs (student homes), approximate mileage (10,400) annually

Center & Program Supplies – supplies and materials in providing the delivery of services, activities, meals, education, and other direct services to the youth at 11% = **\$1,000**

General Liability and vehicle Insurance costs @ 28% = **\$3,000**

Field trips: 100% field trip costs for youth. = **\$1,000**

Building Utilities paid to the City of Homestead @40% = **\$2,975**

Telephone Costs @ 41% = **\$1,500**

TOTAL AWARD

\$50,575

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GALATA, Inc.
Adult Day Care - A
Budget Narrative
October 1, 2012 – September 30, 2013

Categories

FY2012-13

I. Direct Costs

Personnel: Total \$31,625 = Salaries + Fringes

- 25% of the annual salary for one FT Case Manager/Book Keeper (Kerna Michel) - **\$7,500**
- Fringe benefits to include FICA/MICA, Ins. and WC at 15%- **\$1,125**

- 71% of the annual salary for one FT Activities Director (Y. Suckie) - **\$10,000**
- Fringe benefits to include FICA/MICA, Ins. and WC. At 15%- **\$1,500**

- 39% of the annual salary for one FT Case Manager J. Dors) - **\$10,000**
- Fringe benefits to include FICA/MICA, Ins. and WC. At 15%- **\$1,500**

Other Direct Costs

General Liability and vehicle Insurance costs @ 28% = \$3,000

Transportation for clients, vehicle maintenance, and fuel costs @ 31% = \$2,000

20 passenger 2010 Chevy C4500 bus, the bus does two (2) pick-ups in the morning and (2) drop off in the afternoon, approximate mileage 23,400 annually

Center Supplies – supplies and materials in providing the delivery of services, activities, meals, education, and other direct services @ 86@ = \$7,850

Telephone Costs @ 27% = \$1,000

Contractual Services – Accounting Services

Accounting services billed at a total semi-annual cost to include monthly reconciliation of records and preparation of financial/quarterly reports 81% = **\$7,775**

Audit: 2011 Audit = \$7,500

Building Utilities paid to the City of Homestead @40% = \$3,000

TOTAL BUDGET

\$63,750

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GALATA, Inc.
60+ Bridging the Gap - D
Budget Narrative
October 1, 2012 – September 30, 2013

Categories

FY2012-13

I. Direct Costs

Personnel

Case Manager/Book Keeper

- 50% of the annual salary for one FT Case Manager/Book Keeper (Kerna Michel) - **\$15,000**
- Fringe benefits to include FICA/MICA, Ins. and WC. A portion of the fringes (50%) or **\$2,250** is allocated to this award.

Case Manager

- 100% of the salary for one FT Case Manager (A. Gerra) - **\$18,000**
- Fringe benefits are calculated at 15% of the total salary and include FICA/MICA, Insurance and WC. A portion of the fringes (50%) or **\$2,700** is allocated to this award.

General Liability and vehicle Insurance costs @ 19% = \$2050

TOTAL BUDGET **\$40,000**

NEW
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GALATA, Inc.
Special Transportation Project - B
Budget Narrative
October 1, 2012 – September 30, 2013

Categories

FY2012-13

I. Direct Costs

Personnel

- 61% of the annual salary for one FT Case Manager (J. Dors) - **\$15,500**
- Fringe benefits to include FICA/MICA, Ins. and WC. At 15%- **\$2,325**

- 100% - FT Driver's (O. Jocelin) annual salary - **\$19,500**
- Fringe benefits at 15% to include FICA/MICA, Insurance and WC. - **\$2,925**

- 29% of the annual salary for one FT Activities Director (Y. Suckie) - **\$4,000**
- Fringe benefits to include FICA/MICA, Ins. and WC. At 15%- **\$600**

Travel Transportation of clients, vehicle maintenance, and fuel costs @ 27% = **\$2,400**—
2010 Chevy Challenger 22 seat bus, 15,600 miles annually (est.), four (4) trips daily

Contractual Services – Accounting Services

Accounting services billed at a total semi-annual cost to include monthly reconciliation of records and annual external audit at 19% = **\$2,800**

Other Direct Costs

General Liability and vehicle Insurance costs @ 24% = **\$2,500**

Building Utilities paid to the City of Homestead @20% = **\$1,500**

Telephone Costs @ 32% = **\$1,200**

TOTAL BUDGET

\$55,250

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/14/13

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER  Cennairus, LLC 711 South Osprey, Suite 2 Sarasota, FL 34236	CONTACT NAME: Customer Service Department PHONE (A/C, No, Ext): 941-927-9500 FAX (A/C, No): 941-927-9551 E-MAIL ADDRESS: certificates@cennairus.com
	INSURER(S) AFFORDING COVERAGE INSURER A: Guarantee Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
INSURED Galata Inc 916 North Flagler Ave Homestead FL 33030	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A GWGO334001753-113	01/21/2013	01/21/2014	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER Proof of Insurance	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE  Forrest J. Harris President
---	--

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Office of Management and Budget
Contracts and Grant Management
111 N.W. 1st Street 19th Floor
Miami, FL 33128
T 305-375-4742, F 305-375-4454

miamidade.gov

March 26, 2013

Mr. Joseph G. Louis
Executive Director
Galata, Inc.
916 N. Flagler Avenue
Homestead, FL 33030

Dear Mr. Louis:

The Office of Management and Budget - Grants Coordination (OMB-GC) has reviewed Galata's letter dated March 5th, 2013 as well as its accompanying documentation sent in response to the County's concerns regarding the agency's operations. Unfortunately, the items mentioned below did not adequately address the County's concerns:

- 1) There was no documentation submitted to confirm that Galata has a viable plan and sufficient resources to meet its current financial obligations, to satisfy its past and current mortgage payments, or to secure a safe site for the County funded programs. None of the documentation requested by OMB-GC -- bank statements, financial reports, actual expenses and cost estimates, documentation for current mortgage terms and conditions, bank guarantees, lines of credit or other evidence of financial solvency -- was attached to the agency's correspondence or subsequently submitted to OMB-GC.
- 2) The budget for Galata's Adult Day Care Program still includes a mortgage line item to be charged to the County's General Revenue award, despite multiple stipulations that the mortgage was not an allowable expense.
- 3) There was no documentation to support the agency's claim that the property renovation will be completed by October 2013 or that the City of Homestead is currently reviewing the building plans for that renovation. Additionally, the agency's response neither specified the total cost nor the source of funds for the renovation.
- 4) There was no corrective action plan submitted to outline the steps taken to address the three (3) material deficiencies identified in Galata's 2010 Independent audit report. The submitted agreement with the financial consultant dated August 11, 2011, and the engagement letter from the accounting firm dated August 21, 2012 for compilation of financial reports do not provide sufficient assurance that Galata's fiscal management has the ability to exercise its responsibilities, nor that the agency has established adequate controls over the preparation and review of financial reports. There was also no indication that the agency is changing its accounting system from a cash to an accrual basis, as recommended by the auditors.
- 5) The agency did not submit an independent audit for the fiscal year that ended on December 31, 2011, or an engagement letter from a Certified Public Accounting firm attesting that such an audit has been initiated.

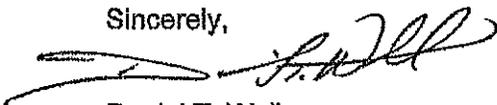
Mr. Joseph Louis
Page 2

- 6) Galata's response did not include a Table of Organization. The response consisted of a staff list that failed to indicate Galata's organizational structure, segregation of fiscal and management duties, and the hierarchy of authority and responsibility. The response also indicated that the agency hired a new Deputy Director and that a contract would be attached; yet, that employee's contract as well as documentation that justified the selection and hiring of this person have not been submitted to OMB-GC.
- 7) The agency's response did not include a plan to ensure that the agency's General Revenue supported projects will meet their expected service levels for FY 2012-13.
- 8) The agency's certificate of insurance does not list Miami-Dade County as a certificate holder. Further, Galata's auto insurance coverage has been cancelled since February 25, 2013.
- 9) There was no documentation that confirmed the active involvement of Galata's Board of Directors in the effective oversight of the agency's operations.

As a result of the conditions mentioned above, Miami-Dade County will not execute the General Revenue contract with Galata for FY 2012-13. As stipulated in its FY 2011-12 agreement, the agency is required to maintain complete and accurate program and fiscal records to substantiate compliance with the contract requirements for a period of five (5) years from the expiration date of that contract. Those documents and records must be kept on file and made available if requested by the County during future reviews or site visits.

Please contact Felipe M. Rivero, III, Administrator of our Contracts and Grants Management Section, at 305-375-4765 if you have any additional questions regarding the items mentioned above.

Sincerely,



Daniel T. Wall
Assistant Director

C: Ms. Claire Canje, Chairperson of the Board
Jennifer Moon, Director, OMB