

# MEMORANDUM

Agenda Item No. 11(A)(8)

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**TO:** Honorable Chairman Bruno A. Barreiro  
and Members, Board of County Commissioners


**DATE:** January 10, 2008

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

**SUBJECT:** Resolution retroactively  
authorizing in-kind services  
from Miami-Dade Transit  
for the Living History event

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

  
\_\_\_\_\_  
R. A. Cuevas, Jr.  
County Attorney

RAC/bw




# MEMORANDUM

(Revised)

TO: Honorable Chairman Bruno A. Barreiro  
and Members, Board of County Commissioners

DATE: January 10, 2008

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

SUBJECT: Agenda Item No. 11(A)(8)

Please note any items checked.

- "4-Day Rule" ("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
- Bid waiver requiring County Manager's written recommendation
- Ordinance creating a new board requires detailed County Manager's report for public hearing
- Housekeeping item (no policy decision required)
- No committee review

Approved \_\_\_\_\_ Mayor

Agenda Item No. 11(A)(8)

Veto \_\_\_\_\_

1-10-08

Override \_\_\_\_\_

RESOLUTION NO. \_\_\_\_\_

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE MIAMI-DADE TRANSIT AGENCY FOR THE OCTOBER 20-21, 2007 "LIVING HISTORY" EVENT SPONSORED BY THE REDLAND TROPICAL GARDENS AND BOTANICAL FOUNDATION, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$3,909.00 TO BE FUNDED FROM THE COUNTYWIDE IN-KIND RESERVE FUND

**WHEREAS**, the Redland Tropical Gardens and Botanical Foundation, Inc. has requested in-kind services from the Miami-Dade Transit Agency for the October 20-21, 2007 "Living History" event in an amount not to exceed \$3,909.00 (see attached Fee Waiver/In-kind Service Application); and

**WHEREAS**, the purpose of the "Living History" event is to improve and promote the eco-tourism and agro-tourism, and provide economic exposure to the businesses in order to promote jobs; and

**WHEREAS**, the Redland Tropical Gardens and Botanical Foundation, Inc. is a not-for-profit organization; and

**WHEREAS**, the "Living History" event is a special event, as defined in the attached Fee Waiver/In-kind Service Application and the in-kind services shall be funded from the Countywide In-kind Reserve Fund,

**NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA**, that this Board retroactively authorizes in-kind services from the Miami-Dade Transit Agency for the October 20-21, 2007

“Living History” event in an amount not to exceed \$3,909.00 to be funded from the Countywide In-kind Reserve Fund.

The foregoing resolution was sponsored by Commissioner Dennis C. Moss and 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:

Bruno A. Barreiro, Chairman	
Barbara J. Jordan, Vice-Chairwoman	
Jose "Pepe" Diaz	Audrey M. Edmonson
Carlos A. Gimenez	Sally A. Heyman
Joe A. Martinez	Dennis C. Moss
Dorrin D. Rolle	Natacha Seijas
Katy Sorenson	Rebeca Sosa
Sen. Javier D. Souto	

The Chairperson thereupon declared the resolution duly passed and adopted this 10<sup>th</sup> day of January, 2008. 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.

WR

Monica Rizo

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#3909-

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

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:

Deloras Green  
Office of Strategic Business Management  
111 N.W. 1<sup>st</sup> 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.

1. Full legal name of the requesting organization: REDLAND TROPICAL GARDENS & BOTANICAL FOUNDATION, INC.

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.): MARGIE BUSTER, PRES.  
REDLAND TROPICAL GARDENS - 24030 SW 167 AVE (33031)  
ADM. PH (305-247-2016) FX (305-247-3004) - 240 W. KROME AVE (33030)  
TOURS PH (305-247-5172) EMAIL - MARGI BUSTER@YAHOO.COM

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

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries):  
"LIVING HISTORY" OCT. 20 AND 21ST.  
PURPOSE - EDUCATIONAL - AGRICULTURE + ENVIRONMENT  
BENEFICIARIES - REDLAND TROPICAL GARDENS (DBA)  
OBS 4  
CALLEY SQUARE HISTORIC VILLAGE

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

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MOSS

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

- 7. Physical address of event venues (please specify Commission District(s)): CAULEY SQUARE VILLAGE  
22400 OLD DIXIE HWY - GOULDS  
DISTRICT 9
- 8. Description of regional or local impact: COMMUNITY PRIDE, ECONOMIC  
BENEFIT TO BUSINESSES, EMPLOYMENT,  
PREVENT IMPACT ON ENVIRONMENT,  
SUSTAIN AGRICULTURE INDUSTRY  
KICK OFF ECO-TOURISM + AGRO-TOURISM  
IMPROVE EDUCATIONAL EXPOSURE
- 9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable):  
EVENT 10:00 AM TO 4:00 PM - OCT. 20  
10:00 AM TO 4:00 PM - OCT. 21
- 10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): 22400 OLD DIXIE, GOULDS  
CAULEY SQUARE VILLAGE  
SEE PAGE # 06
- 11. Expected number of participants and estimated attendance (per day, if applicable): 2,000 - 5,000 visitors  
expected
- 12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): SEE Pg #07

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

[Signature]  
Signature of Authorized Representative

10/18/07  
Date

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Form **W-9**  
(Rev. January 2003)  
Department of the Treasury  
Internal Revenue Service

### Request for Taxpayer Identification Number and Certification

Give form to the  
requester. Do not  
send to the IRS.

Print or type  
See Specific Instructions on page 2.

Name  
**REDLAND TROPICAL GARDENS AND BOTANICAL FOUNDATION, INC.**

Business name, if different from above

Check appropriate box:  Individual/Sole proprietor  Corporation  Partnership  Other **501(c)(3)**  Exempt from backup withholding

Address (number, street, and apt. or suite no.)  
**24050 SW 162 AVE (33031)**

City, state, and ZIP code  
**HOMESTEAD, FLORIDA 33031**

1st account number(s) here (optional)

Requester's name and address (optional)

#### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.

Social security number

--	--	--	--	--	--	--	--	--	--

or

Employer identification number

**6540655603**

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

#### Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. person (including a U.S. resident alien).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here

Signature of U.S. person

*[Signature]*

Date

**10/18/07**

#### Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

**U.S. person.** Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

**Note:** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Foreign person.** If you are a foreign person, use the appropriate Form W-8 (see Pub. 615, Withholding of Tax on Nonresident Aliens and Foreign Entities).

#### Nonresident alien who becomes a resident alien.

Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement that specifies the following five items:

- The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
- The treaty article addressing the income.
- The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
- The type and amount of income that qualifies for the exemption from tax.
- Sufficient facts to justify the exemption from tax under the terms of the treaty article.

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Pg. 0547



**Consumer's Certificate of Exemption**

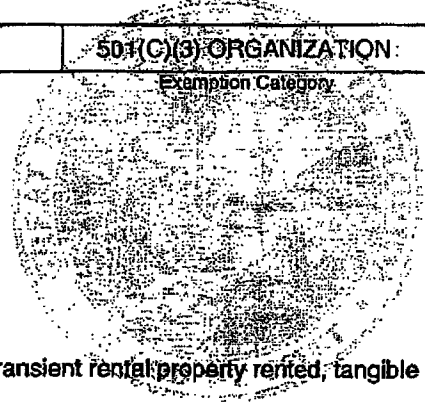
Issued Pursuant to Chapter 212, Florida Statutes

DR-14  
R. 04/05  
06/15/07

85-8012509192C-4	02/26/2007	02/29/2012	501(C)(3) ORGANIZATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

REDLAND TROPICAL GARDENS AND  
BOTANICAL FOUNDATION INC  
240 N KROME AVE  
HOMESTEAD FL 33030-6019



is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.



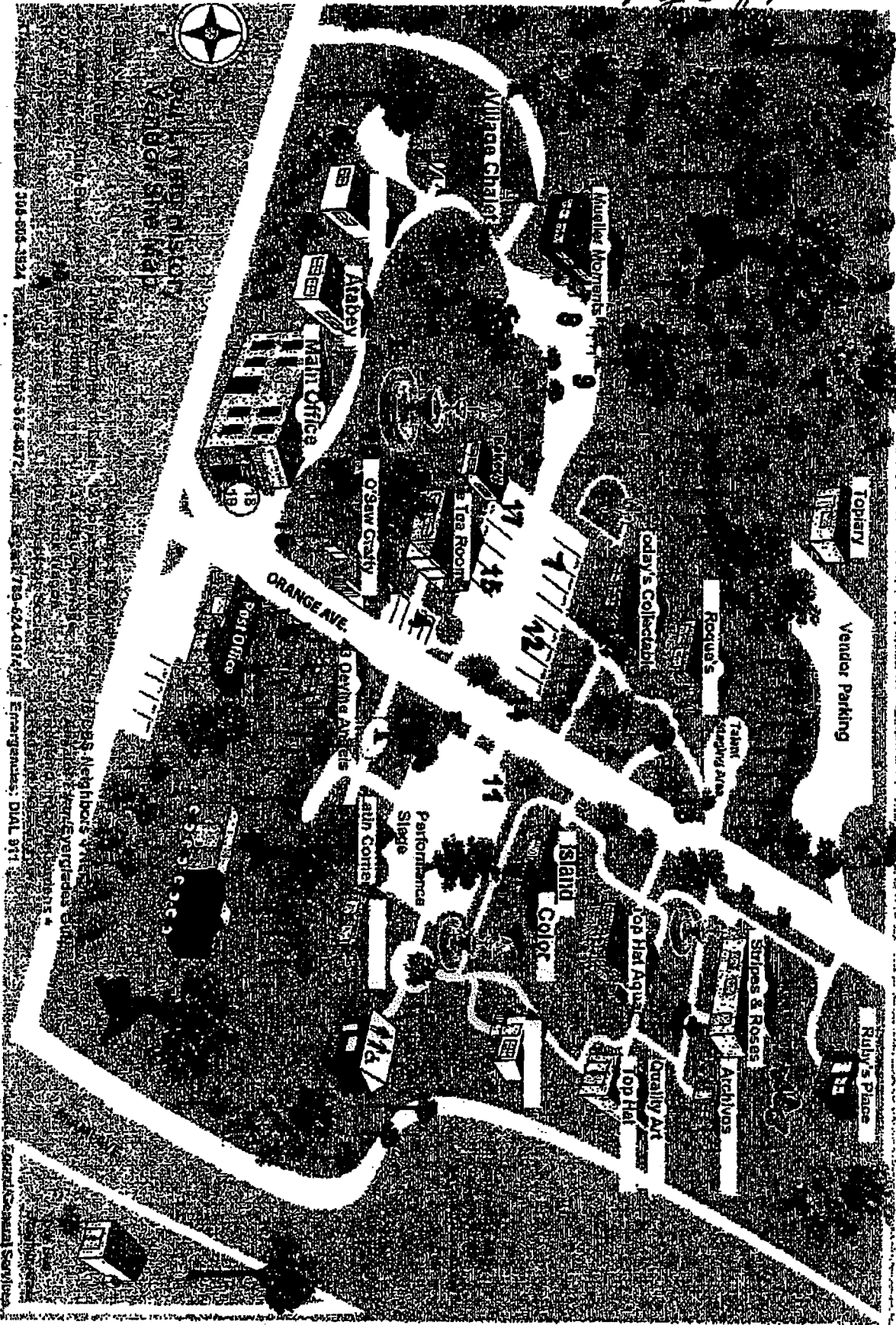
**Important Information for Exempt Organizations**

DR-14  
R. 04/05

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (FAC).
2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.
3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.
4. This exemption applies only to purchases your organization makes. The sale or lease to others by your organization of tangible personal property, sleeping accommodations or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, FAC).
5. ~~It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third degree felony. Any violation will necessitate the revocation of this certificate.~~
6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Central Registration at 850-487-4130. The mailing address is PO BOX 6480, Tallahassee, FL 32314-6480.

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304-504-1824  
 305-578-4872  
 726-624-0314  
 Emergencies: DIAL 911  
 305-578-4872  
 726-624-0314  
 Emergencies: DIAL 911

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**Redland Tropical Gardens**

To: Commissioner Dennis Moss

From: Margi Buster, President,  
Redland Tropical Gardens

Subject: attached, Living History Budget

Location fees and services including, permits, day and night security, tables chairs, and clean up  
\$6,000.00

Event Staff  
\$4,000.00

Entertainment  
\$7,000.00

Professional Tour Guides  
\$650.00

Buses  
\$1,800.00

Marketing and printing  
\$5,000.00

Total  
\$24,450.00



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[Events](#)

No Name History

## Detail by Entity Name

### Florida Non Profit Corporation

REDLAND TROPICAL GARDENS AND BOTANICAL FOUNDATION, INC.

### Filing Information

**Document Number** N95000003626  
**FEI Number** 650655603  
**Date Filed** 07/31/1995  
**State** FL  
**Status** ACTIVE  
**Last Event** REINSTATEMENT  
**Event Date Filed** 06/16/2006  
**Event Effective Date** NONE

### Principal Address

240 NORTH KROME AVENUE  
HOMESTEAD FL 33030 US

Changed 06/16/2006

### Mailing Address

240 NORTH KROME AVENUE  
HOMESTEAD FL 33030 US

Changed 06/16/2006

### Registered Agent Name & Address

BUSTER, MARGIE  
240 NORTH KROME AVENUE  
HOMESTEAD FL 33030 US

Address Changed: 06/16/2006

### Officer/Director Detail

#### Name & Address

Title D

BUSTER, MARGIE  
240 NORTH KROME AVENUE  
HOMESTEAD FL 33030 US

Title D

CAMPBELL, RUTH  
240 NORTH KROME AVENUE  
HOMESTEAD FL 33030 US

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Title D

MULHERN, PAUL  
240 NORTH KROME AVENUE  
HOMESTEAD FL 33030 US

Title D

WALDMAN, MERVIN  
240 NORTH KROME AVENUE  
HOMESTEAD FL 33030 US

**Annual Reports**

**Report Year Filed Date**

2005	06/16/2006
2006	06/16/2006
2007	03/05/2007

**Document Images**

- [03/05/2007 -- ANNUAL REPORT](#)
- [06/16/2006 -- REINSTATEMENT](#)
- [03/02/2000 -- ANNUAL REPORT](#)
- [05/10/1999 -- ANNUAL REPORT](#)
- [05/18/1998 -- ANNUAL REPORT](#)
- [07/30/1997 -- ANNUAL REPORT](#)
- [02/12/1996 -- ANNUAL REPORT](#)

**Note:** This is not official record. See documents if question or conflict.

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[Events](#)   [No Name History](#)

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**From:** Person, Sylvia (MDT)  
**Sent:** Friday, October 12, 2007 12:41 PM  
**To:** Sumpter, Helena V. (DIST9)  
**Cc:** Bannerman, Wayman G. (DIST9); Vazquez, Maricely (DIST9); Manuel, Dallas L. (DIST9)  
**Subject:** RE: District In-kind

Here is the cost:  
3 buses @ \$68.40 (weekend rate) for two days (6 hours per day) plus travel miles \$3,908.80.  
Make sure that the In-kind application is processed. We do not want to be "Super-sized" by Ms. Greene. @

Sylvia Person  
Special Event Services Coordinator  
Miami Dade Transit  
(O) 305-375-2632  
(C) 305-216-1229  
(Fax) 305-375-4894

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**From:** Sumpter, Helena V. (DIST9)  
**Sent:** Thursday, October 11, 2007 1:09 PM  
**To:** Person, Sylvia (MDT)  
**Cc:** Bannerman, Wayman G. (DIST9); Vazquez, Maricely (DIST9); Manuel, Dallas L. (DIST9)  
**Subject:** RE: District In-kind

Sylvia I need a quote for 4 buses for "The Living History of So. Dade Tour"  
Date: October 20 -21, 2007, 10 am to 4 pm (both days)  
Location: 22400 Old Dixie Highway (Cauley Square)  
Contact: Margie Buster (305) 247-2016

Thanks

-----Original Message-----

**From:** Bannerman, Wayman G. (DIST9)  
**Sent:** Thursday, October 11, 2007 11:58 AM  
**To:** Sumpter, Helena V. (DIST9)  
**Cc:** Manuel, Dallas L. (DIST9); Vazquez, Maricely (DIST9)  
**Subject:** District In-kind  
**Importance:** High

Lena, please contact Ms. Margie Buster (305-247-2016) for their need of buses (district in-kind) for their event this month.

Dallas, please place on your calendar to join or greet them at cauley square  
Thanks

Wayman G. Bannerman, MBA  
Chief of Staff  
Office of Commissioner  
Dennis C. Moss, District 09  
111 NW 1st Street, Suite 320  
Miami Fla., 33128  
305-375-1745, Fax 305-372-6011  
wgb@miamidade.gov

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10/19/2007

# Memorandum



**Date:** January 10, 2008

**To:** Honorable Chairman Bruno A. Barreiro  
and Members, Board of County Commissioners

**From:** George M. Burgess  
County Manager

A handwritten signature in black ink, appearing to read "G. Burgess", written over the printed name of the County Manager.

**Subject:** Countywide In-Kind Request Recommendation

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The Office of Strategic Business Management (OSBM) has reviewed the attached in-kind request and recommends for the item to move forward to the Board of County Commissioners for consideration. The countywide in-kind reserve balance allows for the funding of this request.

## Background

A retroactive waiver for in-kind services has been requested by a not-for-profit organization the Redland Tropical Gardens and Botanical Foundation, Inc. for the "Living History" held on October 20 and 21, 2007.

In-kind services have been requested in an amount not to exceed \$3,909 from the Miami-Dade Transit Agency for transportation services (3 shuttle buses). This event will be funded from the countywide in-kind reserve fund.

In FY 2007-08, the Redland Tropical Gardens and Botanical Foundation, Inc. has received no County funding for this event.

Inkind1308