

# Waste Management Community Benefits Request for Donations

The City of Riviera Beach, in conjunction with Waste Management Inc. of Florida, has established a Community Benefits Policy, as amended in November 2011. Under the Policy each elected official shall be entitled to designate up to \$15,000 per year (\$7,500 on October 1<sup>st</sup> and \$7,500 on April 1<sup>st</sup>) for public purposes. Public purposes include, but are not limited to, charitable events, not-for-profit organizational events or programs and City functions or projects (which may include contributions to the City's Scholarship Fund or the City's Housing Trust Fund). All requests for donations must be presented to the City Council and approved by a majority of the City Council. The City will attempt to process all requests within fourteen (14) days of City Council approval.

Ineligible uses include the purchase of tables at events, campaign contributions, or payment for salaries or operational expenses. Funds cannot be used to cover an elected official's travel, meals, or for his or her personal benefit or gain or for the personal gain of relatives as defined by City Code, the Palm Beach County Code of Ethics, or state statutes, as applicable. Funds cannot be given to an entity/agency/organization for which the elected official is a director or officer.

Name of Elected Official Sponsoring Donation: <u>KA Shamba</u>   1111El - All act Sur					
Legal Name of Organization: OPTRATION RESTORE					
Program/ Activity Name: Talent Show Requested Amount: \$ 2,500					
Briefly describe the Program/Activity below and attach (1) a letter of request or a more detailed description of the Program/Activity; (2) non-profit status paperwork and (3) w-9 IRS form:  Back-to-School Citywide Talent Show					
Mailing Address: PO JOX /0//					
City: AWIER A BACK State: The Zip: 33 4/9					
Contact Person(s): De Philly M. Prif					
Phone: 56-877-7499 Fax:					
Email Address:					
Name of Authorized Official: Dr. Phillip M. Drukg					
Signature of Authorized Official: De Chilf M Ruhy Date: 41FOLF					
""Return the form to the Elected Official or the Legislative Office for processing.					
State 1 of 0					

APR 18 ZEB

## Waste Management Community Benefits Request for Donations Approval by Elected Official

I, Kashawa Miller Anderson, hereby certify that the donation to Coecation Restore complies with the City's Community Benefits Policy. I further certify that: (1) I am not an officer, director, partner, proprietor, employee, subcontractor or agent of the organization, its parent organization or subsidiary and I do not have any contractual relationship with or other obligation with to the organization its parent organization or subsidiary; (2) I have no relatives or business associates (as those terms are defined in section 112.312, Florida Statutes) who are officers, directors, partners, proprietors, employees, subcontractors or agents of the organization, its parent organization or subsidiary; (3) The disbursement of the foregoing amount will not inure to my special gain or loss or to the special gain or loss of my relatives or my business associates; and (4) I am not aware of any conflict of interest the disbursement of the foregoing amount to the organization will create for the City of Riviera Beach or myself.  Signature of Elected Official:					
Amount Approved by Elected Official: \$ 500,00					
City Council Action					
☐ Approved ☐ Disapproved					
Chairperson's Signature: Date:					

Page 2 of 2

Revised November 2011

# Operation Restore, Inc.

501(c)(3)

### Community and Youth City-wide Back-to-School Talent Show

Date: August 18, 2018

Location: Tate's or Wells Gym Time: 11:00 a.m. – 3:00 p.m.

The goal of this event is to motivate community and disenfranchised youth to go into a positive direction, stand against gun violence, thug life and drug dealing. We are calling all residents of Riviera Beach into the concept of zero tolerance for drug dealing and thug life that breeds the gun violence, murder, and community decay and youth delinquency. We are motivating all citizens of Riviera Beach to have high standards for disenfranchised youth in the west side communities.

Talent Show:

All clean. No profanity

Poem Contest - "Why you should not use or sell drugs? or I want to be.."

Rap Contest

Singing Contest (Recording session with PMD productions)

Dance Contest

Acting Contest (Winner featured in upcoming video)

Athlete speaker

Age groups:

For all city youth

4 years old to 7 years old (1st prize \$200; 2nd prize \$100) 8 years old to 12 years old (1st prize \$300; 2nd prize \$200) 13 years old to 19 years old (1st prize \$500; 2nd prize \$250)

**Process:** 3-week audition process (held at Operation Restore)

Auditions period June 4-5, 2018

Address: 1217 Avenue U, Riviera Beach, Florida

Budget: \$ 13,500

Prizes: \$1,500

Food: \$3,0

\$3,000 (Attendance 250-300 people)

Chicken, ribs, hot dogs, baked beans, drinks

Cotton Candy Machine: \$300.00

Gym Rental:

Sound system: \$ 1,200 - 6-hours event Black History Exhibit and lecture: \$500

Public Relations: \$3,000 - Radio, advertisement, printed materials

Security: \$400

Set up and clean-up crew: \$500

Director/Planner: \$2,500 Miscellaneous: \$600

## " W-9

(Rev. December 2014)
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.

intemat	Revenue Service					
	1 Name (as shown	on your income tax return). Name is required on this line; do	not teave this line blank.			
લં	2 Business name/	disregarded entity name, if different from above				
Print or type Specific Instructions on page	Check appropriate box for federal tax classification; check only one of the follondividual/sole proprietor or Corporation S Corporation ingle-inember LLC		n Partnership rust/estate	4 Exemptions (codes apply only to certain entities, not individuals; see Instructions on page 3):  Exempt payee code (if any)		
	Imited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) P  Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the single-member owner.			Exemption from FATCA reporting code (if any)  (Applies to accounts maintained outside the U.S.)		
를 들	Other (see Ins		Requester's name	and address (optional)		
See Specifi	17 AVE- 6 City, state, and RIVIERA	Beach 33419				
	7 List account no	nber(s) here (optional)				
		and desident on Number (TIM)				
Enter your TiN In the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 3.  Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.						
Pat	d Certif	ication				
Hodo	s parallice of per	uny I certify that:				
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and						
<ol> <li>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 fallure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and</li> </ol>						
3. 14	am a U.S. citizen «	or other U.S. person (defined below); and				
	- EATOS	autored on this form (if any) indicating that I am exem	pt from FATCA reporting is correct.			
Certification instructions. You must cross out item 2 above if you have been notified by the IRS hat you are currently subject to backer with the language because you have falled to report all interest and dividends on your tex return. For real estate transactions, item 2 does not apply. For mortgage because you have falled to report all interest and dividends on your tex return. For real estate transactions, item 2 does not apply. For mortgage because you have falled to report all interest and dividends on your cancellation of debt, contributions to an individual retirement arrangement (IRA), and interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the						
	uctions on page 3	1 Day Inchip	//	IP-MP		
Sig Her			Date▶	100010		
General Instructions  • Form 1098 (home mortgage Interest), 1098-E (student loan Interest), 1098-T (tuition)						
Secti	ion references are to	the Internal Revenue Code unless otherwise noted.	Form 1099-C (canceled debt)     Form 1099-A (acquisition or abandonment of secured property)			
Future developments, information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/iw9.		Use Form W-9 only if you are a U.S. person (including a resident aller), to				
Purpose of Form		If you do not return Form W-9 to the requester with a TIN, you might be subject				
An Individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), Individual taxpayer identification number (TIN), adoption taxpayer Identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information		to backup withholding. See What is backup withholding? on page 2.  By signing the filled-out form, you:  1. Certify that the TIN you are giving is correct (or you are waiting for a number				
		to be Issued).  2. Certify that you are not subject to be				
returns include, but are not limited to, the following:			2. Claim exemption from backin with	2. Claim examption from backing withholding if you are a U.S. exampt payee, if		
Form 1099-INT (interest earned or paid)     Form 1099-DIV (dividends, including those from stocks or mutual funds)			applicable, you are also certifying that are	applicable, you are also certifying that as a U.S. person, your subject to the		
Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)			withholding tax on foreign partners' share of effectively connected alcohol, and			
<ul> <li>Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)</li> </ul>			4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.			
• Fo	• Form 1099-S (proceeds from real estate transactions)					

• Form 1099-K (merchant card and third party network transactions)



#### CONSUMER S CERMICALE OF EVENINATION

#### Issued Pursuant to Chapter 212, Florida Statutes

85-8012546814C-2 09/30/2016 09/30/2021 501(C)(3) ORGANIZATION

Certificate Number Effective Date Expiration Date Exemption Category

This certifies that

OPERATION RESTORE INC 1217 AVENUE U RIVIERA BEACH FL 33404-6562

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. 10/15

- You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases.
   See Rule 12A-1.038, Florida Administrative Code (F.A.C.).
- 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 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, F.A.C.).
- 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 require the revocation of this certificate.
- 6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Account Management at 800-352-3671. From the available options, select "Registration of Taxes," then "Registration information," and finally "Exemption Certificates and Nonprofit Entities." The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.



Department of State / Division of Corporations / Search Records / Detail By Document Number /

### **Detail by Entity Name**

Florida Not For Profit Corporation OPERATION RESTORE, INC.

Filing Information

**Document Number** 

N98000003474

**FEI/EIN Number** 

65-0846101

**Date Filed** 

06/15/1998

State

FL

**Status** 

**ACTIVE** 

Principal Address

1217 AVENUE U

RIVIERA BEACH, FL 33404

Changed: 05/01/2010

**Mailing Address** 

PO BOX 10111

RIVIERA BEACH, FL 33419

Changed: 04/29/2014

Registered Agent Name & Address

DUKES, PHILLIP M., Dr.

1217 AVENUE U

RIVIERA BEACH, FL 33404

Name Changed: 04/30/2013

Address Changed: 05/01/2010

Officer/Director Detail

Name & Address

Title CEOD

DUKES, LACHANDRA

PO BOX 10111

RIVIERA BEACH, FL 33419

Title STD

INGRAHAM. ANTOINETTE Y