

CITY OF OAKLAND
Interoffice Memorandum



Office of Parks and Recreation

TO: Parks and Recreation Advisory Commission
FROM: Gail McMillon, Central Reservations Supervisor
DATE: May 1, 2008
SUBJECT: Request approval for the Breast Cancer Fund to collect registration fees for the 5th Annual Bike Against the Odd at Lakeside Park on Saturday, August 23, 2008.

SUMMARY

The Office of Parks and Recreation has received a request from the Breast Cancer Fund, a non-profit organization, requesting permission to collect registrations fees on the day of their Bike Against All Odds Ride at Lakeside Park, Saturday, August 23, 2008. The registration fees collected helps to identify and advocates for elimination and preventable causes of Breast Cancer.

FISCAL IMPACT

There will be no fiscal impact on the Office of Parks and Recreation. The Breast Cancer Fund has paid the rental fees, sound use fee and deposit.

BACKGROUND

This is the 5th Annual Bike Against All Odds in which the Breast Cancer Fund has rented Lakeside Park to host their event and has come before the Parks and Recreation Advisory Commission for approval to collect registration fees for the same event. Their requests were granted and the events have been successful and went as planned.

The overall goal of the event is to respond to the public health crisis of breast cancer, the Breast Cancer Fund identifies – and advocates for elimination of – the environmental and other preventable causes of the disease.

RECOMMENDATION

Staff recommends that the Park and Recreation Advisory Commission approve the request for the Breast Cancer Fund to collect registration fees at their 5th Annual Bike Against All Odds on Saturday, August 23, 2008. This group is aware that additional permits are required provided their request to collect donations and sell merchandise on site is granted.

Respectfully submitted,

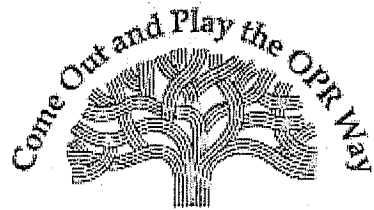
Gail McMillon

Gail McMillon
Central Reservations Supervisor

Central Reservations Unit

250 Frank H. Ogawa Plaza Ste 3330
Oakland, CA 94612

(510) 238-3187



CITY of OAKLAND
OFFICE of PARKS & RECREATION

Breast Cancer Fund
1388 Sutter St. #400
San Francisco, CA 94109

Reservation Request

Status: In-Process

Customer Type:

Authorized Agent: Ariane Trelaun

Work: (510) 843-8048 x13 Home:

DATE/USER	REQUEST NUMBER	CHARGES	DISCOUNT	TAXES	REFUNDS & CREDITS	PAYMENTS	REQUEST EXPIRES	BALANCE DUE
02/01/2008 Armando Aguilera	9002381	\$720.00	\$0.00	\$0.00	\$0.00	\$720.00	08/22/2008	\$0.00

RESERVATIONS

EVENT NAME	FACILITY	CENTER
Bike/Walk Attendance: 400 Type: Park Run/Walk	Lakeside Park Near Bandstand	Lakeside Park Lake Merritt Oakland, CA 94610

DATES RESERVED	HRS	DATES RESERVED	HRS		
Friday - 8/22/2008	12:00 PM to 08:00 PM	8	Saturday - 8/23/2008	06:00 AM to 06:00 PM	12

Total Number of Dates: 2

Total Number of Hours: 20

NOTES:

2/21/08; Received in office for permission to collect registration fee and have 7 expo booths passing out informational material. aa

Actual event time: 7 am to 4 pm.

Sound Allowed: Please review the Sound Amplification Policy and be aware of residents living nearby.

***Customer must obey the Bike Operation Rules Ordinance - 12.60.070 ***

Customer understands that the park must be left clean & clear of all garbage/debris generated from this event.

Foods Served: Organic Box Lunches. ***ABSOLUTELY NO ALCOHOL PERMITTED AT THIS EVENT.***

CHARGES

CHARGE DESCRIPTION	FACILITY/EVENT	UNIT FEE	QTY	TAX	TOTAL CHARGED	DISCOUNTED/PAID	BALANCE DUE
CRU Park Use Permit Fee	Lakeside Park Near Bandstand - Bike/Walk	\$300.00	1.00	\$0.00	\$300.00	\$300.00	\$0.00
CRU Park Use Permit Fee	Lakeside Park Near Bandstand - Bike/Walk	\$120.00	1.00	\$0.00	\$120.00	\$120.00	\$0.00
CRU Sound Permit Fee	Lakeside Park Near Bandstand - Bike/Walk	\$50.00	1.00	\$0.00	\$50.00	\$50.00	\$0.00
Deposit (Rentals)	Lakeside Park Near Bandstand - Bike/Walk	\$250.00	1.00	\$0.00	\$250.00	\$250.00	\$0.00



Office of Parks and Recreation
250 Frank H. Ogawa Plaza, Suite 3330 Oakland,
CA 94612

CITY of OAKLAND
OFFICE of PARKS & RECREATION

Central Reservations Unit
PH (510) 238-3187 Fax (510) 238-2397

Park Use Rental Application

Application Date: _____

ATTENTION:

*RESIDENCY IS DETERMINED ACCORDING TO ADDRESS INDICATED ON DRIVER'S LICENSE OR STATE IDENTIFICATION CARD

OFFICE USE ONLY
REQ No. _____ Receipt No. _____
RWP No. _____ Received By/Date _____ Approved By/Date _____ Issued By/Date _____
Police Special Events Permit Required? Yes No If required, Special Events Permit due to OPR by _____

Application on behalf of: (Group, Individual, Organization) BREAST Cancer Fund
* Address: 1388 Sutter St #400 City: SAN Francisco State: CA Zip: 94109
Individual responsible for event: Name: Amy Larson *Address: 40 JPD Communications 2712 - Ninth Street
City: Berkeley State: CA Zip: 94710 Email: Amy@jpd.com.com
Home #: _____ Work #: 510-843-8048 Fax #: 510-843-8650 Cell #: 510-
To use (Name of Park): Lakeside Park Location: Lake Merritt, Around Bandstand
On the following date (s): August 22-23, 2008 General Public Allowed: Yes No Number of Participants: 400
Between the hours of: (Start Time/Setup) 5:00 AM (Actual Event Time) from 7 AM to 4 pm (End Time/Cleanup) 6 pm
Type of Event/Purpose (be specific; i.e., Picnic, Walk/Run, Entertainment, Family Reunion, Rally, etc.)
Fundraising, non-profit bike ride
Sound Amplification: Amplified Yes No Non-Amplified Yes No
Type of equipment to be used (i.e. jumpers, musical instruments, live band, cd player, amplifiers, microphones, etc.)
DJ
Will food be served? Yes No (If yes, please list type(s) of food to be served.) ORGANIC Box Lunches
Please describe below special accommodations/requests required for your event. If no special accommodations/request required, write NONE.
NONE

Fees:
Rent: \$ 300.00 Deposit: \$ 250.00
Sound Use: \$ 50.00 Other Fees: Friday set-up fee: \$120.00
Total of ALL Fees PLUS Deposit: _____

(Deposits are refunded 6-8 weeks AFTER event date, provided the facility is left in acceptable condition and the event goes as planned)

CANCELLATION FEES: 31 days or more notice: Forfeit 1/2 Deposit
30 days 11 days notice: Forfeit Deposit PLUS 1/2 Rental Fee
10 days or less notice: Forfeit All Fees
Check Amount: \$ 720.00 Check #: _____ Cash: _____
Type of Credit Card (Visa or Master Card Only): _____
Credit Card #: _____ Expiration Date: _____

I Authorize the Office of Parks and Recreation, Central Reservations Unit to charge my Visa or Master Card \$ _____ (Amount to be Charged)
for my reservation at _____ on _____ (Park) (Event Date)

Amy Larson (Signature Required) Aniane Trelawn (Print Name) CS632491 1/10 (Driver License #/Expiration Date)

ATTENTION

- ✓ DID YOU REMEMBER TO SIGN THIS APPLICATION?
- ✓ DID YOU REMEMBER TO ATTACH A LEGIBLE COPY OF YOUR DRIVER'S LICENSE OR STATE IDENTIFICATION CARD?

Internal Revenue Service

Department of the Treasury

P. O. Box 2508
Cincinnati, OH 45201

Date: April 19, 2001

Breast Cancer Fund
2107 O Farrell At Divisadero
San Francisco, CA 94115

Person to Contact:
Steve Brown 31-07422
Customer Service Representative
Toll Free Telephone Number:
8:00 a.m. to 9:30 p.m. EST
877-829-5500
Fax Number:
513-263-3756
Federal Identification Number:
94-3155886

Dear Sir or Madam:

This letter is in response to your request for a copy of your organization's determination letter. This letter will take the place of the copy you requested.

Our records indicate that a determination letter issued in June 1997 granted your organization exemption from federal income tax under section 501(c)(3) of the Internal Revenue Code. That letter is still in effect.

Based on information subsequently submitted, we classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Code because it is an organization described in sections 509(a)(1) and 170(b)(1)(A)(vi).

This classification was based on the assumption that your organization's operations would continue as stated in the application. If your organization's sources of support, or its character, method of operations, or purposes have changed, please let us know so we can consider the effect of the change on the exempt status and foundation status of your organization.

Your organization is required to file Form 990, Return of Organization Exempt from Income Tax, only if its gross receipts each year are normally more than \$25,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of the organization's annual accounting period. The law imposes a penalty of \$20 a day, up to a maximum of \$10,000, when a return is filed late, unless there is reasonable cause for the delay.

All exempt organizations (unless specifically excluded) are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more paid to each employee during a calendar year. Your organization is not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the excise taxes under Chapter 42 of the Code. However, these organizations are not automatically exempt from other federal excise taxes.

Donors may deduct contributions to your organization as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to your organization or for its use are deductible for federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.