

**RESOLUTION No.16-106**

**A RESOLUTION OF THE MAYOR AND THE CITY COUNCIL OF THE CITY OF DORAL, FLORIDA, APPROVING AN OUTDOOR EVENT PERMIT FOR MY VOICE COUNTS INC TO HOST THE “LATINOS UNIDOS POR VENEZUELA 2016” EVENT AT DORAL CENTRAL PARK, LOCATED AT 3000 NW 87TH AVENUE DORAL, FL 33172, ON SUNDAY, JUNE 5, 2016 FROM 8:00AM TO 6:00PM; PROVIDING FOR IMPLEMENTATION; AND PROVIDING FOR AN EFFECTIVE DATE**

**WHEREAS**, the My Voice Counts Inc. (“Applicant”) seeks approval from the City of Doral (the “City”) for an Outdoor Event Permit, pursuant to the application attached hereto as Exhibit “A”; and

**WHEREAS**, staff has recommended that Council approve the Applicant’s proposed Outdoor Event Permit to host the “Latinos Unidos Por Venezuela 2016” event on Sunday, June 5, 2016 at Doral Central Park located at 3000 NW 87<sup>th</sup> Avenue Doral, Florida, 33172.

**NOW, THEREFORE, BE IT RESOLVED BY THE MAYOR AND CITY COUNCIL OF THE CITY OF DORAL, FLORIDA, AS FOLLOWS:**

**Section 1. Recitals.** The above recitals are true and correct and incorporated herein.

**Section 2. Approval.** The outdoor event permit for the “Latinos Unidos Por Venezuela” event is hereby approved subject to the following conditions:

1. the comments made by the City of Doral Police Department, as attached hereto as Exhibit “B”;
2. the comments set forth by the Parks and Recreation Department, as attached hereto as Exhibit “C”; and

3. the acquisition of all required permits and performing the necessary inspections prior to event start, provided by the City of Doral Building Department, along with all requisite fees, as attached hereto as Exhibit "D."

All attachments are incorporated herein and made a part hereof by this reference.

**Section 3. Implementation.** The City Manager and the City Attorney are hereby authorized to take such further action as may be necessary to implement the purpose and provisions of this Resolution.

**Section 4. Effective Date.** This Resolution shall take effect immediately upon adoption.

The foregoing Resolution was offered by Councilmember Rodriguez who moved its adoption. The motion was seconded by Councilmember Cabrera and upon being put to a vote, the vote was as follows:

Mayor Luigi Boria	Yes
Vice Mayor Christi Fraga	Yes
Councilman Pete Cabrera	Yes
Councilwoman Ana Maria Rodriguez	Yes
Councilwoman Sandra Ruiz	Yes

PASSED AND ADOPTED this 11 day of May, 2016.



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LUIGI BORIA, MAYOR

ATTEST:



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CONNIE DIAZ, CMC  
CITY CLERK

APPROVED AS TO FORM AND LEGAL SUFFICIENCY  
FOR THE USE AND RELIANCE OF THE CITY OF DORAL ONLY:



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WEISS, SEROTA, HELFMAN, COLE, & BIERMAN, PL  
CITY ATTORNEY

# EXHIBITS

- Public Property Event Permit
- Special Private Property Event Permit



CITY OF DORAL  
PLANNING & ZONING DEPARTMENT  
OUTDOOR EVENT PERMIT

Special Event Latinos Unidos por Venezuela Class       

Promoter/Organization My Voice Counts Inc

Facility Address 3000 NW 87th Ave DCIP as adjacent to adjacent

Hours of Operation 10:00 AM to 6:00 PM Estimated Attendance/Day 300 people

**TYPE OF EVENT:**

Music     
  Parade     
  Art Show     
  TV Commercial     
  Movie Filming  
 Athletic     
  Other (specify) Charity Event

**EXTRAORDINARY USES:**

Animals     
  Firearms     
  Explosives/Fireworks     
  Road Closures     
  Cooking  
 Alcoholic Beverages served\*     
  Tents/temp structures     
  Aircraft  
 Other (specify) \_\_\_\_\_

\* For events where alcoholic beverages will be served, page three of this application must be filled out.

**Approved: (Initials & Date)**

City Manager \_\_\_\_\_

Planning & Zoning Director \_\_\_\_\_

Building Official [Signature] 4.5.16

Permit(s) Required? Yes  No \_\_\_\_\_ Type(s) BEP F \_\_\_\_\_

Parks & Recreation Director \_\_\_\_\_

Police Department \_\_\_\_\_

Fire Department \_\_\_\_\_

Please be advised that a Building permit and fee may be required.



Council meeting  
May 11

Paperwork: April 20

### OUTDOOR EVENT APPLICATION TRACKING SHEET

Event Name: Latinos Unidos Por Venezuela  
Organization Name: My Voice Counts Inc.  
Submitted Date: \_\_\_\_\_ Event Date: 6/5/16

#### BUILDING DEPARTMENT

Date SUBMITTED: 4/13/16  
Date RETURNED: 4/15/16  
B, E, P - Required permits

*Pending  
to submit.*

#### POLICE DEPARTMENT

Date SUBMITTED: 4/1/16  
Date RETURNED: 4/22/16

#### PLANNING AND ZONING DEPARTMENT

SUBMITTED: 4/1/16  
RETURNED: \_\_\_\_\_

*emailed applicant regarding B, E, P Permit. 4/13/16  
emailed applicant P&Z. 4/20/16*

#### PARKS AND RECREATION DEPARTMENT

Date SUBMITTED: 4/1/16  
RETURNED: \_\_\_\_\_

*emailed Parks regarding Comments  
& fees. 4/20/16 (Parks)*

*P  
Comments  
& Fees.*

#### PUBLIC WORKS DEPARTMENT

SUBMITTED: \_\_\_\_\_  
RETURNED: \_\_\_\_\_



OUTDOOR EVENT APPLICATION

03/28/2016  
Date of Application

Name of Person or Organization (Permittee) My Voice Counts Inc.

Mailing Address 10131 Hutton Circle, Orlando, FL 32832

Represented By Mildred Rodriguez Title \_\_\_\_\_

Phone (407) 9523022 Fax -

Is your organization For-profit \_\_\_\_\_ Non-Profit

Location or Park Area requested Doral Central Park (3000 NW 87 Av Doral, FL 33178)

Describe fully the space required for your event, and how your event will contribute to the benefit of the community

This event aims to raise funds to buy medicine to be sent to Venezuela, we will offer events and food trucks with all their equipment. The benefits provided for the community of Doral will spend a day with family, games, food, entertainments, prizes, surprises, recreational area, photos, recreation, etc.

What type of entertainment is planned, include performer(s) name(s) and/or group(s) name(s)

DJ to entertain the audience

Dates of Event 06/05/2016

Rain Date (if any) NO

Period of Requested Use (Including Set-up / Tear-down and Clean-up time):

From 9:00 AM To 8:00 PM.

Hours of Operations 10:00 AM - 6:00 PM

Estimated Size of Crowd: Participants 150 people Spectators 300 people

Who is the contact person for your event?

Name Genmar Padron

Address 10560 NW 74 St, Doral, FL 33178

Agency Punto de Enfoque

Telephone (781) 2349085 genmarpadron@gmail.com

## OUTDOOR EVENT HISTORY

List the five (5) last events sponsored by your organization and where they were held. Please include the event name, date, total attendance, problems (if any), location of event, phone number of event location, and contact name for reference.

1. Vacunate contra el virus del Bullying.  
500 people. La Scuola de Brickell. (786)8038194  
No hubo problemas.

2. Vacunate contra el virus del Bullying.  
540 people. Lake Wales High School, Marcoossee,  
FL. (407)9568300. No hubo problemas.

3. Vacunate contra el virus del Bullying  
600 people. 4700 Chisholm Park Trl. St Cloud, FL,  
34771. (407)3437173. No hubo problema

4. I Jornada de Información. 200 people.  
Renaissance Community Senior Center, Orlando, FL  
(407)2549070. No hubo problema.

5. Evento experiencia de las 8 semanas con  
Ola Tuñón. 120 people. Frederick Park, Orlando, FL  
(407)2444486. No hubo problema.

Do you owe anyone money for expenses incurred or revenue promised from prior events?

Date	Event	Person	Amount Owed
N/A	N/A	N/A	N/A



## OUTDOOR EVENT BUDGET

Detail fully the intended use, type of business and scope of operation

### DETAILED REVENUE

Source	Price	Total Amount of Income
Food truck (8)	\$500	\$4000
TENTS (Products) (50)	\$300	\$15000
TENTS (Service) (10)	\$200	\$2000
Total Revenue		\$21000

### DETAILED EXPENDITURES

Item	Total Amount of Expense	
TENTS Rental	\$2200	
Platform Rental	\$900	
Recreational Children	\$2040	
Portables Toilets Rental	\$1500	
DI Sound Rental	\$600	
Floral POP	\$890	
Marketing and Advertising	\$980	
Total Expenses		\$9110
Net Income Expected		\$11890

### DETAILED IN KIND SERVICES

Item	Value of Contribution	
Total Value		

Describe the intended use of net income generated from this special event

The intended use of net revenues generated with this special event will be for the purchase of medical supplies that will be sent to Venezuela to try to work with the great crisis in the South American Country.

OUTDOOR EVENT ACTIVITIES/ELEMENTS

List all Co-Sponsors

Name	Address	City, State Zip	Phone Number
N/A	N/A	N/A	N/A

What is the principal business activity of these co-sponsors?

Name	Activity
N/A	N/A

Will alcoholic beverages be served at your event? Yes \_\_\_\_\_ No

Beer - Price -

Wine - Price -

Describe who, where and what time the alcoholic beverages will be served

-

-

Will your special event require tents? (Requires a permit if greater than 10' x 10' or if cooking under any size tent)

Yes  No \_\_\_\_\_

Indicate size and number of tents size 10" x 10" ABOUT 60 TENTS.

What are the electrical requirements of the Event?

Generator(s) - Size in Watts - OR Fed from Building Electrical -

Number of lights and outlets to be used 50 outlets.

What type of restroom facilities will be provided? Portapit

Number of toilets 10 (must show location and distance of the restroom facilities on the Site Plan)

Will your special event have live or taped music?

Yes  No \_\_\_\_\_ Type of music Variada.

Describe who, where and what music will be presented

DJ Sound: merengue, salsa, reggaeton, pop latino, bachata, Rap, Hip-Hop, 5 Cumbia, vallenato, Regional, etc.





INTERNAL REVENUE SERVICE  
P. O. BOX 2508  
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: JUN 25 2015

MY VOICE COUNTS INC  
10131 HATTON CIR  
ORLANDO, FL 32832

Employer Identification Number:  
47-2026110  
DLN:  
17053140334005  
Contact Person:  
THOMAS C KOESTER ID# 31116  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
December 31  
Public Charity Status:  
170(b)(1)(A)(vi)  
Form 990 Required:  
Yes  
Effective Date of Exemption:  
October 15, 2014  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Director, Exempt Organizations



Date of this notice: 10-07-2014

Employer Identification Number:  
47-2026110

Form: SS-4

Number of this notice: CP 575 E

MY VOICE COUNTS  
% MILDRED RODRIGUEZ  
10131 HATTON CIR  
ORLANDO, FL 32832

For assistance you may call us at:  
1-800-829-4933

IF YOU WRITE, ATTACH THE  
STUB AT THE END OF THIS NOTICE.

#### WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 47-2026110. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it's very important that you use your EIN along with your complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information shown above isn't correct, please send us the correction using the attached tear-off stub.

#### Annual filing requirements

Most organizations with an EIN have an annual filing requirement, even if they engage in minimal or no activity.

A. If you are tax exempt, you may be required to file one of the following returns or notices:

Form 990, Return of Organization Exempt From Income Tax  
Form 990-EZ, Short Form Return of Organization Exempt From Income Tax  
Form 990-PF, Return of Private Foundation  
Form 990-N, e-Postcard (available online only)

Additionally, you may be required to file your annual return electronically.

If an organization required to file a Form 990, Form 990-PF, Form 990-EZ, or Form 990-N does not do so for three consecutive years, its tax-exempt status is automatically revoked as of the due date of the third return or notice.

Please refer to [www.irs.gov/990filing](http://www.irs.gov/990filing) for the most current information on your filing requirements.

B. If you are not tax-exempt, you may be required to file one of the following returns:

Form 1120, U.S. Corporation Income Tax Return  
Form 1041, U.S. Income Tax Return for Estates and Trusts  
Form 1065, U.S. Return of Partnership Income

Please refer to Publication 1635, Understanding Your EIN, for more information about which forms you may be required to file.

Applying for Tax-Exempt Status

Receiving an EIN from the IRS is not the same thing as receiving IRS recognition of tax-exempt status. To apply for formal recognition of tax-exempt status, most organizations will need to complete either Form 1023, *Application for Recognition Under Section 501(c)(3) of the Internal Revenue Code*, or Form 1024, *Application for Recognition of Exemption Under Section 501(a)*. Submit the completed form, all applicable attachments, and the required user fee to:

Internal Revenue Service  
PO Box 12192  
Covington, KY 41012-0192

Publication 557, *Tax Exempt Status for Your Organization*, has details on the application, process as well as information on returns you may need to file.

Additional information

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at [www.irs.gov](http://www.irs.gov). If you don't have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

**IMPORTANT REMINDERS:**

- \* Keep a copy of this notice in your permanent records. **This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.** You may give a copy of this document to anyone asking for proof of your EIN.
- \* Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- \* Refer to this EIN on your tax-related correspondence and documents.
- \* Provide future officers of your organization with a copy of this notice.

If you have questions about your EIN, you can contact us using the phone number or address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you don't need to write us, please don't complete and return this stub.

Your name control associated with this EIN is MYVO. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.

INTERNAL REVENUE SERVICE  
CINCINNATI OH 45999-0023  
|||||

MY VOICE COUNTS  
& MILDRED RODRIGUEZ  
10131 HAYTON CIR  
ORLANDO, FL 32832

Your Telephone Number Best Time to Call \_\_\_\_\_  
( ) -  
EMPLOYER IDENTIFICATION NUMBER: 47-2026110  
FORM: SS-4 NOBOD  
DATE OF THIS NOTICE: 10-07-2014

Return this part with any correspondence  
so we may identify your account. Please  
correct any errors in your name or address.

99999999999999

CP 575 E

Keep this part for your records. CP 575 E (Rev. 7-2007)

**FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS****Detail by Entity Name****Florida Not For Profit Corporation**

MY VOICE COUNTS, INC.

**Filing Information**

<b>Document Number</b>	N14000009616
<b>FEI/EIN Number</b>	47-2026110
<b>Date Filed</b>	10/15/2014
<b>State</b>	FL
<b>Status</b>	ACTIVE

**Principal Address**10131 HATTON CIRCLE  
ORLANDO, FL 32832**Mailing Address**10131 HATTON CIRCLE  
ORLANDO, FL 32832**Registered Agent Name & Address**RODRIGUEZ, MILDRED  
10131 HATTON CIRCLE  
ORLANDO, FL 32832**Officer/Director Detail****Name & Address**

Title D

RODRIGUEZ, MILDRED  
10131 HATTON CIRCLE  
ORLANDO, FL 32832

Title D

YERENA, CAROLINA  
10005 MOSS ROSE PARK  
ORLANDO, FL 32832

Title D

RIVAS, KARINA  
14439 SW 95 LN



MIAMI, FL 33189

**Annual Reports**

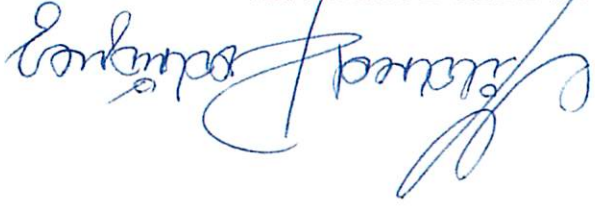
<b>Report Year</b>	<b>Filed Date</b>
2015	04/30/2015

**Document Images**

<u>04/30/2015 -- ANNUAL REPORT</u>	<a href="#">View image in PDF format</a>
<u>10/15/2014 -- Domestic Non-Profit</u>	<a href="#">View image in PDF format</a>

PRESIDENTE

MILDRED RODRIGUEZ



I My Voice Counts INC. agree to hold The City of Doral, its agent and authorized personnel harmless and relieve them from any responsibility or liability for any legal action or damage, cost or expense ( including attorney's ) resulting from damage and/ or personal injury that should occur on the premises.

My Voice Counts  
INC.  
COUNTS  
VOICE  
MT



## Outdoor Events Submittal Checklist

Event Organizer:

Event Date: 06/05/2016

- I. Outdoor Event Application  ~~(Pending Hold harmless)~~ 3/31/16
- II. \*Fee (350.00)   
N/A
- III. Hold Harmless Letter  ~~(pending) printed name on cover~~ 3/31/16
- IV. \*\*Site Plan
- V. Insurance  (pending)
- VI. Owner's Letter of Approval  @ Doral Central Park  
N/A
- VII. \*\*\*Consumer's Certificate of Exemption OR Letter from Department of Treasury (IRS)   
emailed applicant regarding Hold Harmless Printed name, and size of stage. 3/29/16

\* Note: If application was submitted less than 7 days prior to the event, there is an additional late charge of \$200.00.

\*\* Note: Please attach a diagram of the set-up for the event. Show as much detail as possible. Show crowd flow, controls, seating, and parking. Also show configuration and sizes of stage(s), concession booths, tent(s) location, portable toilets, and fire protection equipment.

\*\*\* ONLY FOR NON-PROFIT ORGANIZATIONS









## MEMORANDUM

To: Brian J. Sliman  
Deputy Chief

Date: April 19, 2016

Via: Chain-of-Command

Re: Action Plan: Latinos Unidos por Venezuela  
2016

From: Stephanie Bortz *AB*  
Special Events Coordinator

### **BACKGROUND:**

The City of Doral received an Outdoor Event Permit application for the Latinos Unidos por Venezuela. This event will take place on Sunday, June 5, 2016, from 10:00 a.m. to 6:00 p.m. This event will be held at Doral Central Park which is located at 3000 NW 87<sup>th</sup> Avenue. The promoter, My Voice Counts, estimates that the attendance for this event will be approximately three hundred (300) people. Contact was made with Ms. Genmar Padron and the information contained within the Outdoor Event Permit application was confirmed. The purpose of this event is to raise funds to buy medicine that would be sent to Venezuela. The main event area will be located on the northwest corner of Doral Central Park and it will include sixty (60) 10x10 tents, eight (8) food trucks, a Disc Jockey, and a kid zone. There will be sixteen (16) portable toilets throughout the event area. Event parking will be within Doral Central Park.

### **RECOMMENDATION:**

It is recommended that below extra duty police personnel be utilized for interior security and traffic control on the day of the event between 9:30 a.m. and 6:30 p.m.

### **TOTAL EXTRA-DUTY COSTS:**

Rank	Number of Officers	Extra-Duty Rate	Hours	Total
Officer	2	\$51.30	9	<b>\$923.40</b>

Attachments (15)

APPROVED

DATE

DISAPPROVED

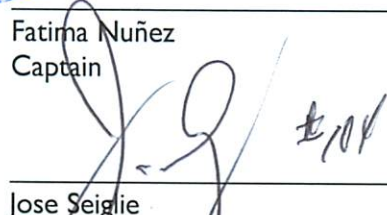
\_\_\_\_\_  
Cathy Jewett  
Lieutenant



\_\_\_\_\_  
April 20, 2016

\_\_\_\_\_  
Cathy Jewett  
Lieutenant

\_\_\_\_\_  
Fatima Nuñez  
Captain



\_\_\_\_\_  
April 20, 2016

\_\_\_\_\_  
Fatima Nuñez  
Captain

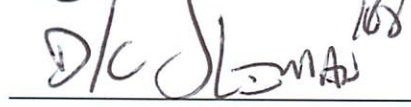
\_\_\_\_\_  
Jose Seiglie  
Major



\_\_\_\_\_  
04/20/16.

\_\_\_\_\_  
Jose Seiglie  
Major

\_\_\_\_\_  
Brian J. Sliman  
Deputy Chief



\_\_\_\_\_  
Brian J. Sliman  
Deputy Chief

## Outdoor Event Park Fees

Non-Profit (Doral)    
 Non-Profit (Other)    
 For Profit

<b>Name of Organization:</b>	My Voice Counts, Inc.
<b>Event Title:</b>	Latinos Unidos por Venezuela
<b>Event Duration:</b>	10:00am to 6:00pm (8 Hours)
<b>Contact Person Name:</b>	Genmar Padron
<b>Contact Person Telephone:</b>	786-234-9085
<b>Date of Event:</b>	6/5/2016
<b>Park:</b>	Doral Central Park
<b>Rental Location(s):</b>	Zone E
<b>Parking Zone(s):</b>	Zone 2
<b>Proposed Attendance:</b>	300 people
<b>Actual Attendance:</b>	

Staff Fees Breakdown				
Employee Name	Title	Hourly Rate	# of Hours	Total
TBD	APM	\$17.26	10	\$172.60
TBD	PSA	\$11.00	10	\$110.00
TBD	PSA	\$11.00	10	\$110.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
<b>Staff Fees Total</b>				<b>\$392.60</b>

Fees	Amount Charged	Amount Waived	Amount Refunded
	Rental Fee	\$225.00	
Staff Fees	\$392.60		
Trash Container Disposal	\$0.00		
Restroom Holding Tank Cleaning	\$0.00		
Janitorial Supplies	\$100.00		
Parking Fee	\$0.00		
Additional Hour(s)	\$100.00		
Refundable Deposit	\$200.00		
Taxes	\$57.23		
<b>Totals</b>	<b>\$874.83</b>	<b>\$0.00</b>	<b>\$0.00</b>

<b>Total Amount Charged</b>	<b>\$874.83</b>
<b>Total Amount Waived</b>	<b>\$0.00</b>
<b>Total Amount Refunded</b>	<b>\$0.00</b>
<b>Grand Total</b>	<b>\$874.83</b>

<b>Amount Paid</b>	
<b>Date Paid</b>	
<b>Check #</b>	

## Outdoor Event Park Fees

### Comments:

1. Event location must be changed to Zone E with parking taking place in Zone 2. Event organizer must submit new layout plan for approval.
2. All vehicles must park in Zone 2 to avoid interference with park patrons. Event organizer must provide parking management.
3. Organization will be responsible for ensuring that all third party vendors they are using have adequate liability insurance coverage. The organization will ultimately be responsible for any actions or incidents from any third party vendor.
4. The organization must provide the City with a certificate of liability insurance matching the insurance requirements provided to them.
5. Organization is to provide trash cans for their event area.
6. Organization is to obtain proper permits for all applicable amenities.
7. Organization is to provide a certificate of liability insurance which includes coverage for event participants.
8. Organizer must provide updated site plan based on these comments.
9. Organizer must provide all necessary permits for restrooms.
10. Organizer must provide own power source. Park facility does not have any electrical outlets for use
11. Organizer must provide stage specifications.
12. No outlets are available at Doral Central Park. Organizer must provide plans for generators and other electrical site plan if power will be provided to vendors and event.



- **Parking Zones**
- **Rental Zones**

City of Doral - Outdoor Event  
Latinos Unidos Por Venezuela - My Voice Counts Inc.

No.	Participating City Departments	Required Fees	Notes
1	Police Department	\$ 923.40	
2	Parks & Recreation Department	\$ 874.83	
	<b>Grand Total</b>	\$ 1,798.23	