



City of Chicago



Or2016-252

Office of the City Clerk

Document Tracking Sheet

Meeting Date:	5/18/2016
Sponsor(s):	Burke (14)
Type:	Order
Title:	Tag day permit(s) for Doctors without Borders; Hegewisch Girls Softball League; and Planned Parenthood Federation of America
Committee(s) Assignment:	Committee on Finance

Ordered, that the Committee on Finance is hereby authorized and directed to issue charitable solicitation (tag day) permits to the following organizations:

- A. Doctors without Borders
May 19, 2016 through September 17, 2016
Citywide

- B. Hegewisch Girls Softball League
May 20-21, 2016
Citywide

- C. Planned Parenthood Federation of America
May 19, 2016 through September 17, 2016
Citywide

This order shall take effect and be in force from and after its passage.

Edward M. Burke
Alderman, 14th Ward

**COMMITTEE ON FINANCE CHARITABLE SOLICITATION
TAG DAY REQUEST FORM AND ROUTE SHEET**

PERMIT NUMBER:	2016-14		
GROUP NAME:	Doctors without Borders		
ADDRESS:	333 7th Avenue, Floor 2, New York, NY 10001		
TELEPHONE NUMBER:	(212) 679-6800		
CONTACT PERSON:	Jason Cone, Executive Director		
DATE WRITTEN REQUEST WAS RECEIVED:	April 19, 2016		
SOLICITATION DATE:	May 19, 2016 through September 17, 2016		
CITY COUNCIL DATE:	May 18, 2016		
COMPLETION OF FILE DATE:			
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:			
DATE PERMIT LETTER WAS SENT TO ORGANIZATION:	May 18, 2016		
VIOLATION (S)			
COMMITTEE LETTER SENT:			
COMPLY RECEIVED:			
COMMENTS:			

APPLICATION FOR CITY OF CHICAGO CHARITABLE SOLICITATION PERMIT

(Please neatly print or type. In necessary in answering any question, please attach additional sheets.)

1. **Name of organization:** Doctors Without Borders/Médecins Sans Frontières (MSF)
Address: 333 7th Ave, Floor 2, New York, NY 10001
Telephone Number: (212) 679-6800

2. **Use the space below to list names, current positions, residence addresses and telephone numbers of the officers in the organization:**
Jason Cone, Executive Director, (212) 679-6800
Andreu Maldonado, Deputy Director, (212) 679-6800
Thomas Kurmann, Development Director, (212) 679-6800

3. **List the date and approximate location(s) of solicitation:**
Sept. 17, 2016
May 19, 2016
May 1, 2016 - August 31, 2016
in the following approximate locations: The Loop, Wicker Park, Andersonville, near South Side, Logan Square, the Magnificent Mile and Oak Park.

4. **Approximately how many persons will be engaged in the solicitation?**
Team will consist of anywhere from 6 to 20 people.

5. **Explain the methods your organization will use to solicit funds:**
Street canvassing - our team will engage in conversation with people who choose to stop and speak with us about Doctors Without Borders' medical humanitarian work in more than 60 countries, and how they can help.

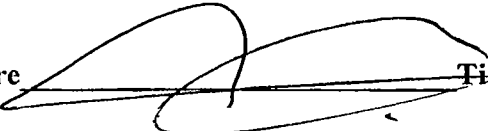
6. **Has your organization ever been allowed to solicit funds in prior years in the City of Chicago? If so, when?**
Yes, in 2010, 2015, and currently (since January 14, 2016 to date).


7. **Include the following with your application:**
 - A. **A copy of the registration statement filed with the Attorney General of the State of Illinois; or exemption issued by the Attorney General of the State of Illinois.**
 - B. **A copy of the tag, badge, emblem or other token (if any) which will be distributed as part of the solicitation, or which will be used by your organization in its solicitation. No tag or emblem will be distributed.**

8. **Please include any other relevant information which would assist the Committee on Finance in reviewing this application.**

APPLICATIONS MUST BE RECEIVED BY THE COMMITTEE ON FINANCE NO LATE THAN 30 DAYS PRIOR TO THE COMMENCEMENT OF THE SOLICITATION.

I/WE, THE OFFICER(S) OF THE ABOVE NAMED ORGANIZATION, CERTIFY THAT THE INFORMATION FURNISHED IN THIS STATEMENT AND ALL ATTACHED SHEETS IS TRUE AND CORRECT TO THE BEST OF MY/OUR KNOWLEDGE. (NOTE: AT LEAST ONE OFFICER OF THE ORGANIZATION MUST SIGN AND VERIFY THIS APPLICATION.)

Signature  Title CFO Date 4/09/16


Signature  Title Director of Development Date 4/09/16

Signature _____ Title _____ Date _____

HOLD HARMLESS AGREEMENT

1. The undersigned officer on behalf of the subject organization agrees to defend, indemnify, save and hold harmless the City of Chicago for any loss, liability, damage or cost which the City may incur due to the presence of volunteers of the subject organization on City premises for the purpose of charitable solicitations.
2. The subject organization assumes full responsibility for risk of bodily injury, death or property damage due to the negligence of the subject organization or otherwise resulting from conduct or activity related to the participation in charitable solicitation on the public way.
3. The officer of the subject organization has read and voluntarily signs the hold harmless agreement and waiver of liability and indemnity agreement.

DOCTORS WITHOUT BORDERS / Médecins Sans Frontières (MSFUSA)
Name of organization


Signature of organization officer

02/06/2016
Date



OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS

September 9, 2015

MEDECINS SANS FRONTIERES USA, INC.
D/B/A DOCTORS WITHOUT BORDERS
333 7TH AVE 2ND FL
NEW YORK, NY 10001

Lisa Madigan
ATTORNEY GENERAL

RE: RE: Status of MEDECINS SANS FRONTIERES USA, INC. D/B/A DOCTORS
WITHOUT BORDERS under the Illinois Charitable Laws
CO# 01025206

Dear Registrant:

This letter is pursuant to your request that the Attorney General confirm the status of MEDECINS SANS FRONTIERES USA, INC. D/B/A DOCTORS WITHOUT BORDERS under the Charitable Organization Laws.

This organization is currently registered with the Attorney General's Charitable Trust and Solicitations Bureau as CO# 01025206. It is current in the filing of its financial reports, having filed its report for the period ended December 31, 2014. Please let us know if you require further information.

Sincerely,

A handwritten signature in black ink, appearing to read "A. Martin Barnes".

Takiyah Martin Barnes, Compliance Officer
Charitable Trusts Bureau
100 West Randolph Street, 11th Floor
Chicago, Illinois 60601
Telephone: (312) 814-2595



City of Chicago

Committee on Finance

City Hall • Room 302

Alderman Edward M. Burke
Chairman

Telephone
744-3380

Dear Charitable Organization:

Please find enclosed the application for a City of Chicago Charitable Solicitation Permit and a copy of the new Chapter 10-8-080 through 10-8-170 of the Municipal Code of the City of Chicago governing charitable solicitation in the City of Chicago.

We would suggest that you read the ordinance and become familiar with the requirements of the law. There are certain requirements for each charitable organization which solicits funds. For example, each person involved in the solicitation must display a tag or card as provided in the section 10-8-140. Section 10-8-150 requires each soliciting organization to file a statement of Receipts and Disbursements with the Committee on Finance. The Committee on Finance must receive the application for the permit no less than thirty (30) days before solicitation is to begin. You should also note that the Committee on Finance is responsible for resolving any conflicts when the same day is requested by two or more groups.

The application should be completed and addressed to:

Committee on Finance
121 North LaSalle Street
City Hall, Room 302
Chicago, Illinois 60602
(Attention: Dawn Sanchez)

If you have any questions regarding the procedure for obtaining a Charitable Solicitation Permit, Please do not hesitate to call Dawn Sanchez of my staff at 312/744-8653.

Sincerely,

A handwritten signature in cursive script that reads "Edward M. Burke".

Edward M. Burke
Chairman
Committee on Finance

EMB/dms

Encl.

**COMMITTEE ON FINANCE CHARITABLE SOLICITATION
TAG DAY REQUEST FORM AND ROUTE SHEET**

PERMIT NUMBER:	2016-13		
GROUP NAME:	Hegewisch Girls Softball League		
ADDRESS:	13243 S. Avenue L, Chicago, IL 60633		
TELEPHONE NUMBER:	773-419-1400		
CONTACT PERSON:	Denise Zavesky		
DATE WRITTEN REQUEST WAS RECEIVED:	April 20, 2016		
SOLICITATION DATE:	May 20-21, 2016		
CITY COUNCIL DATE:	May 18, 2016		
COMPLETION OF FILE DATE:			
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:			
DATE PERMIT LETTER WAS SENT TO ORGANIZATION:	May 18, 2016		
VIOLATION (S)			
COMMITTEE LETTER SENT:			
COMPLY RECEIVED:			
COMMENTS:			

APPLICATION FOR CITY OF CHICAGO CHARITABLE SOLICITATION PERMIT

(Please neatly print or type. In necessary in answering any question, please attach additional sheets.)

1. Name of organization: *Hegewisch Girls Softball League*
Address: *13243 Avenue L, Chicago, IL 60633*
Telephone Number: *773-419-1400*

2. Use the space below to list names, current positions, residence addresses and telephone numbers of the officers in the organization:

resident :	<i>Fred Harnisch</i>	<i>th st, Chgo, IL 60633,</i>	<i>773-</i>
e President:	<i>Ralph Polomino</i>	<i>nhay, Chgo, IL 60633,</i>	<i>773-</i>
osurer:	<i>Denise Zavesky</i>	<i>Chgo, IL 60633,</i>	<i>773-</i>

3. List the date and approximate location(s) of solicitation:

May 20-21, 2016

4. Approximately how many persons will be engaged in the solicitation?

100

5. Explain the methods your organization will use to solicit funds:

We will have a toy day. We will stand on corners and in front of some businesses with their permission & distribute

6. Has your organization ever been allowed to solicit funds in prior years in the City of Chicago? If so, when?

Yes, we do this yearly. We have received permits for the past several years.

7. Include the following with your application:

- A. A copy of the registration statement filed with the Attorney General of the State of Illinois; or exemption issued by the Attorney General of the State of Illinois.
- B. A copy of the tag, badge, emblem or other token (if any) which will be distributed as part of the solicitation, or which will be used by your organization in its solicitation.

8. Please include any other relevant information which would assist the Committee on Finance in reviewing this application.

we are a 501c3 non-for profit organization that provides a league for the community girls to play. We keep our fees low so all girls are able to participate. We rely on fundraising to cover our expenses.

APPLICATIONS MUST BE RECEIVED BY THE COMMITTEE ON FINANCE NO LATE THAN 30 DAYS PRIOR TO THE COMMENCEMENT OF THE SOLICITATION.

I/WE, THE OFFICER(S) OF THE ABOVE NAMED ORGANIZATION, CERTIFY THAT THE INFORMATION FURNISHED IN THIS STATEMENT AND ALL ATTACHED SHEETS IS TRUE AND CORRECT TO THE BEST OF MY/OUR KNOWLEDGE. (NOTE: AT LEAST ONE OFFICER OF THE ORGANIZATION MUST SIGN AND VERIFY THIS APPLICATION.)

Signature *Dennis Guesky* Title Treasurer Date 4/14/16

Signature _____ Title _____ Date _____

Signature _____ Title _____ Date _____

to cover...

HOLD HARMLESS AGREEMENT

1. The undersigned officer on behalf of the subject organization agrees to defend, indemnify, save and hold harmless the City of Chicago for any loss, liability, damage or cost which the City may incur due to the presence of volunteers of the subject organization on City premises for the purpose of charitable solicitations.
2. The subject organization assumes full responsibility for risk of bodily injury, death or property damage due to the negligence of the subject organization or otherwise resulting from conduct or activity related to the participation in charitable solicitation on the public way.
3. The officer of the subject organization has read and voluntarily signs the hold harmless agreement and waiver of liability and indemnity agreement.

Hegewisch Girls Softball
Name of organization

Denise Zmesky
Signature of organization officer

4/14/16
Date

ILLINOIS CHARITABLE ORGANIZATION ANNUAL REPORT

Attorney General **LISA MADIGAN** State of Illinois

Charitable Trust Bureau, 100 West Randolph

11th Floor, Chicago, Illinois 60601

CO # _____

PMT # _____
AMT _____
INIT _____

Report for the Fiscal Period:

Beginning 9/1/2014

& Ending 8/31/2015
MO DAY YR

Check all items attached:

- Copy of IRS Return
- Audited Financial Statements
- Copy of Form IFC
- \$15.00 Annual Report Filing Fee
- \$100.00 Late Report Filing Fee

Make Checks Payable to the Illinois Charity Bureau Fund

Federal ID # _____

Are contributions to the organization tax deductible? Yes No

Date Organization was created: _____

LEGAL NAME	HEGEWISCH GIRLS SOFTBALL LEAGUE	Year-end amounts	
MAIL ADDRESS	13243 AVENUE L	A) ASSETS	A) \$ 58,245
CITY, STATE	CHICAGO IL	B) LIABILITIES	B) \$ 0
ZIP CODE	60633	C) NET ASSETS	C) \$ 58,245

I. SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:

	PERCENTAGE	AMOUNT
D) PUBLIC SUPPORT, CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.)	9%	D) \$ 3,160
E) GOVERNMENT GRANTS & MEMBERSHIP DUES	67%	E) \$ 23,381
F) OTHER REVENUES	24%	F) \$ 8,275
G) TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, & F)	100%	G) \$ 34,816

II. SUMMARY OF ALL EXPENDITURES DURING THE YEAR:

H) OPERATING CHARITABLE PROGRAM EXPENSE	100%	H) \$ 34,678
I) EDUCATION PROGRAM SERVICE EXPENSE	%	I) \$
J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I)	100%	J) \$ 34,678
J1) JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J):		\$
K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS	%	K) \$ 0
L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K)	100%	L) \$ 34,678
M) MANAGEMENT AND GENERAL EXPENSE	%	M) \$ 0
N) FUNDRAISING EXPENSE	%	N) \$
O) TOTAL EXPENDITURES THIS PERIOD (ADD L, M, & N)	100%	O) \$ 34,678

III. SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES:
(Attach Attorney General Report of Individual Fundraising Campaign- Form IFC. One for each PFR.)

PROFESSIONAL FUNDRAISERS:

P) TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS	100%	P) \$
Q) TOTAL FUNDRAISERS FEES AND EXPENSES	%	Q) \$
R) NET RECEIVED BY THE CHARITY (P MINUS Q=R)	%	R) \$ 0

PROFESSIONAL FUNDRAISING CONSULTANTS:

S) TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS		S) \$
--	--	-------

IV. COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YEAR:

T) NAME, TITLE:	T) \$
U) NAME, TITLE:	U) \$
V) NAME, TITLE:	V) \$

V. CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPENDED) CODE CATEGORIES

DESCRIPTION:	List on back side of instructions CODE
W) DESCRIPTION:	W) #
X) DESCRIPTION:	X) #
Y) DESCRIPTION:	Y) #

IF THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:

- | | YES | NO |
|---|-----|----|
| 1. WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT? -----1. | | X |
| 2. HAS THE ORGANIZATION OR A CURRENT DIRECTOR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF, EVER BEEN CONVICTED BY ANY COURT OF ANY MISDEMEANOR INVOLVING THE MISUSE OR MISAPPROPRIATION OF FUNDS OR ANY FELONY? ----- 2. | | X |
| 3. DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE ANYTHING OF VALUE NOT REPORTED AS COMPENSATION? ----- 3. | | X |
| 4. HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHARES? ----- 4. | | X |
| 5. IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION? ----- 5. | | X |
| 6. DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC) ----- 6. | | X |
| 7a. DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES? ----- 7. | | X |
| 7b. IF "YES", ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS \$ _____ ; (ii) THE AMOUNT ALLOCATED TO PROGRAM SERVICES \$ _____ 0 ; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT AND GENERAL \$ _____ ; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING \$ _____ | | |
| 8. DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES? ----- 8. | | X |
| 9. HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY? ----- 9. | | X |
| 10. WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS? ----- 10. | | X |
| 11. LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS:- | | |

FIRST SAVNGS BANK OF HEGEWISCH 13220 BALTIMORE AVE CHICAGO IL 60633

CHECKING AND SAVINGS ACCOUNT

12. NAME AND TELEPHONE NUMBER OF CONTACT PERSON: DENISE ZAVESKY 773-646-1589

ALL ATTACHMENTS MUST ACCOMPANY THIS REPORT - SEE INSTRUCTIONS

UNDER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS ANNUAL REPORT AND THE ATTACHED DOCUMENTS, INCLUDING ALL THE SCHEDULES AND STATEMENTS AND THE FACTS THEREIN STATED ARE TRUE AND COMPLETE AND FILED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE OF THE STATE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGISTRANT HEREBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.

BE SURE TO INCLUDE ALL FEES DUE:

- .) REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END.
- .) FOR FEES DUE SEE INSTRUCTIONS.
- .) REPORTS THAT ARE LATE OR INCOMPLETE ARE SUBJECT TO A

\$100.00 PENALTY

PRESIDENT or TRUSTEE (PRINT NAME)	SIGNATURE	DATE
TREASURER or TRUSTEE (PRINT NAME)	SIGNATURE	DATE
TERRI JENDRA		3/27/2016
PREPARER (PRINT NAME)	SIGNATURE	DATE

**COMMITTEE ON FINANCE CHARITABLE SOLICITATION
TAG DAY REQUEST FORM AND ROUTE SHEET**

PERMIT NUMBER:	2016-15		
GROUP NAME:	Planned Parenthood Federation of America		
ADDRESS:	123 William Street, New York, NY 10038		
TELEPHONE NUMBER:	(212) 541-7800		
CONTACT PERSON:	Cecile Richards, President		
DATE WRITTEN REQUEST WAS RECEIVED:	April 19, 2016		
SOLICITATION DATE:	May 19, 2016 through September 17, 2016		
CITY COUNCIL DATE:	May 18, 2016		
COMPLETION OF FILE DATE:			
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:			
DATE PERMIT LETTER WAS SENT TO ORGANIZATION:	May 18, 2016		
VIOLATION (S)			
COMMITTEE LETTER SENT:			
COMPLY RECEIVED:			
COMMENTS:			

APPLICATION FOR CITY OF CHICAGO CHARITABLE SOLICITATION PERMIT

(Please neatly print or type. If necessary in answering any question, please attach other sheets.)

1. Name of organization: PLANNED PARENTHOOD FEDERATION OF AMERICA

Address: 123 WILLIAM STREET, NEW YORK, NY 10038

Telephone Number: 212-541-7800

2. Use the space below to list names, current positions, residence addresses and telephone numbers of the officers in the organization:

CECILE RICHARDS, PRESIDENT, 123 WILLIAM STREET, NEW YORK, NY 10038, 212-541-7800

JETHRO MILLER, CHIEF DEVELOPMENT OFFICER, 123 WILLIAM STREET, NEW YORK, NY 10038, 212-541-7800

3. List the date and approximate location(s) of solicitation?

5/19/16 ~~5/1/16~~ - ~~8/15/16~~ : THE LOOP, WICKER PARK, ANDERSONVILLE, NEAR SOUTHSIDE, LOGAN SQUARE, MAGNIFICENT MILE & OAK PARK
9/17/16

4. Approximately how many persons will be engaged in the solicitation?

BETWEEN 6 AND 30.

5. Explain the methods your organization will use to solicit funds:

PLANNED PARENTHOOD FEDERATION OF AMERICA HAS HIRED GRASSROOTS CAMPAIGNS, INC. TO CANVASS IN THE CITY OF CHICAGO.

6. Was your organization ever allowed to solicit funds in prior years in the City of Chicago? If so, when?

YES - 2016 (JANUARY 14, 2016 - APRIL 30, 2016)
2015 (OCTOBER 17, 2015 - DECEMBER 31, 2015)

7. Include the following with your application:

A. A copy of the registration statement filed with the Attorney General of the State of Illinois; or exemption issued by the Attorney General of the State of Illinois.

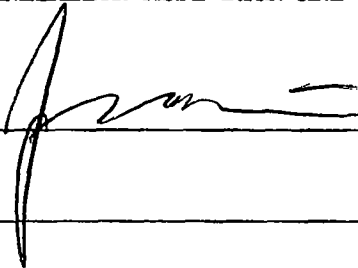
B. A facsimile of the tag, badge, emblem or other token (if any) which will be distributed as part of the solicitation, or which will be used by your organization in its solicitation.

NO TAG OR EMBLEM WILL BE DISTRIBUTED.

8. Please include any other relevant information which would assist the Committee on Finance in reviewing this application.

APPLICATIONS MUST BE RECEIVED BY THE COMMITTEE ON FINANCE NO LATER THAN 30 DAYS PRIOR TO THE COMMENCEMENT OF THE SOLICITATION.

I/WE, OFFICER(S) OF THE ABOVE NAMED ORGANIZATION, CERTIFY THAT THE INFORMATION FURNISHED IN THIS STATEMENT AND ALL ATTACHED SHEETS IS TRUE AND CORRECT TO THE BEST OF MY/OUR KNOWLEDGE. (NOTE: AT LEAST ONE OFFICER OF THE ORGANIZATION MUST SIGN AND VERIFY THIS APPLICATION.)

Signature  Title CDO Date 4/18/16

Signature _____ Title _____ Date _____

HOLD HARMLESS AGREEMENT

1. The undersigned officer on behalf of the subject organization agrees to defend, indemnify, save and hold harmless the City of Chicago for any loss, liability, damage or cost which the City may incur due to the presence of volunteers of the subject organization on City premises for the purpose of charitable solicitations.

2. The subject organization assumes full responsibility for risk of bodily injury, death or property damage due to the negligence of the subject organization or otherwise resulting from conduct or activity related to the participation in charitable solicitation on the public way.

3. The officer of the subject organization has read and voluntarily signs the hold harmless agreement and waiver of liability and indemnity agreement.

PLANNED PARENTHOOD FEDERATION OF AMERICA
Name of organization

[Handwritten Signature]
Signature of organization officer

4/19/16
Date



**OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS**

May 13, 2016

PLANNED PARENTHOOD
FEDERATION OF AMERICA, INC.
123 WILLIAM STREET, 10TH FL OR
NEW YORK, NY 10038

Lisa Madigan
ATTORNEY GENERAL

RE: RE: Status of PLANNED PARENTHOOD FEDERATION OF AMERICA, INC. under
the Illinois Charitable Laws
CO# 01009083

Dear Registrant:

This letter is pursuant to your request that the Attorney General confirm the status of
PLANNED PARENTHOOD FEDERATION OF AMERICA, INC. under the Charitable
Organization Laws.

This organization is currently registered with the Attorney General's Charitable Trust and
Solicitations Bureau as CO# 01009033. It is current in the filing of its financial reports, having
filed its report for the period ended June 30, 2015. Please let us know if you require further
information.

Sincerely,

Takiyah Martin Barnes, Compliance Officer
Charitable Trusts Bureau
100 West Randolph Street, 11th Floor
Chicago, Illinois 60601
Telephone: (312) 814-2595



18

CHICAGO May 18, 2016

To the President and Members of the City Council:

Your Committee on Finance having had under consideration one (1) order authorizing three (3) applications for City of Chicago Charitable Solicitation (Tag Day) permits.

- A. Doctors without Borders
May 19, 2016 through September 17, 2016
Citywide

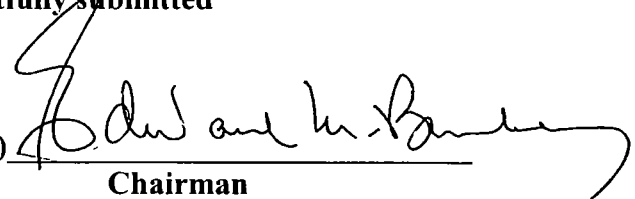
- B. Hegewisch Girls Softball League
May 20-21, 2016
Citywide

- C. Planned Parenthood Federation of America
May 19, 2016 through September 17, 2016
Citywide

Having had the same under advisement, begs leave to report and recommend that your Honorable Body pass the ordinance(s)/order(s) transmitted herewith.

This recommendation was concurred in by _____ (a viva voce vote of the members of the committee with _____ dissenting vote(s)).

Respectfully submitted

(signed) 
Chairman

