



City of Chicago



Or2014-179

Office of the City Clerk

Document Tracking Sheet

Meeting Date:	4/30/2014
Sponsor(s):	Burke (14)
Type:	Order
Title:	Tag day permit(s) for Alpha Gamma Delta-Chicago Northwest Suburban Alumnae Club, American Legion- Peoples Gas Post No. 336 and Polish Legion of American Veterans
Committee(s) Assignment:	Committee on Finance

CHICAGO April 30, 2014

To the President and Members of the City Council:

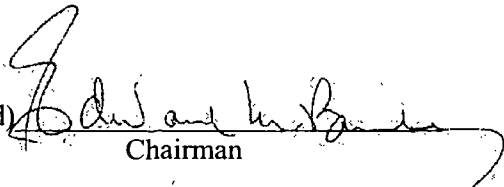
Your Committee on Finance having had under consideration one (1) order authorizing three (3) applications for City of Chicago Charitable Solicitation (Tag Day) permits.

- A. Alpha Gamma Delta – Chicago Northwest Suburban Alumnae Club
- B. American Legion –Peoples Gas Post #336
- C. Polish Legion of American Veterans

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 _____ (viva voce vote)
of the members of the committee with _____ dissenting vote(s)).

Respectfully submitted

(signed) 
Chairman

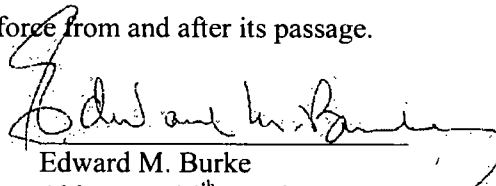
Document No. _____

**REPORT OF THE COMMITTEE ON FINANCE
TO THE CITY COUNCIL
CITY OF CHICAGO**

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

- A. Alpha Gamma Delta – Chicago Northwest Suburban Alumnae Club
 June 21, 2014
 Citywide
- B. American Legion –Peoples Gas Post #336
 May 22-23, 2014
 Citywide
- C. Polish Legion of American Veterans
 May 15-18, 2014
 Citywide

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


Edward M. Burke
Alderman, 14th Ward

Document No. _____

**REPORT OF THE COMMITTEE ON FINANCE
TO THE CITY COUNCIL
CITY OF CHICAGO**

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

PERMIT NUMBER:	2014-09		
GROUP NAME:	Alpha Gamma Delta – Chicago Northwest Suburban Alumnae Club		
ADDRESS:	8710 N. Meridian St., Indianapolis, IN 46260		
TELEPHONE NUMBER:	317-663-4200		
CONTACT PERSON:	Sarah Hughes		
DATE WRITTEN REQUEST WAS RECEIVED:	April 17, 2014		
SOLICITATION DATE:	June 21, 2014		
CITY COUNCIL DATE:	April 30, 2014		
COMPLETION OF FILE DATE:			
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:			
DATE PERMIT LETTER WAS SENT TO ORGANIZATION:	April 30, 2014		
<u>VIOLATION (S)</u>			
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:** *Chicago Northwest Suburban Alumnae Club
Alpha Gamma Delta*
Address: *8710 N. Meridian St.
Indianapolis, IN 46260*
Telephone Number: *317-663-4200*
2. **Use the space below to list names, current positions, residence addresses and telephone numbers of the officers in the organization:**
*Sarah Hughes, President, 370 S. Ridge Rd, Lake Forest, IL 60045 847.234-3850
Rose Albano, V.P. Membership 801 Highland Grove Dr. Buffalo Grove IL 60089 847-215-0042
Mary Kertler, Secretary 920 Knollwood Dr. Buffalo Grove, IL 60089 847-634-3946*
3. **List the date and approximate location(s) of solicitation:**
6/21/14 Diversy Ave, Sheridan, Lakeview, Stockton
4. **Approximately how many persons will be engaged in the solicitation?**
30
5. **Explain the methods your organization will use to solicit funds:**
*Ladies will ask pedestrians walking by to donate to Juvenile Diabetes
by collecting money in hand held containers.*
6. **Has your organization ever been allowed to solicit funds in prior years in the City of Chicago? If so, when?**
Yes 2013
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 will only be doing this for less than one hour
in the afternoon.*

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.

CHICAGO NORTHWEST SUBURBAN ALUMNAE CLUB
Name of organization OF ALPHA GAMMA DELTA

Rose Allen, V-P, Membership
Signature of organization officer

4-14-14
Date

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 Pam Allen Title Vice-President Date 4-14-14

Signature Paul Hughes Title President Date 4-15-14

Signature _____ Title _____ Date _____



FAX TRANSMISSION

Charitable Trusts and Solicitations Bureau
100 W. Randolph Street, 11th Floor
Chicago, IL 60601-3175

Phone: (312) 814-2595 Fax: (312) 814-2596

To: Gay Kelly Date: 04/11/2014

Fax: 773-342-1513 Pages: (2) including cover page

From: Takiyah Martin-Barnes
Compliance Officer
Direct: 312-814-5840

Subject: Letter of Good Standing for CO# 01041174

COMMENTS:

Forms can be downloaded at www.illinoisattorneygeneral.gov under "Building Better Charities."

This FAX may contain attorney-client, attorney work product or other privileged and/or confidential information. This FAX is intended only for the use of the individual for whom or entity to which it is addressed. If you have received this FAX in error, please notify the sender at the above telephone number and destroy this FAX. If you are not the intended recipient, you are hereby notified that any retention or dissemination of this FAX and/or the information it contains is strictly prohibited.

ORIGINAL (check one) ☒ WILL ☐ WILL NOT BE SENT BY MAIL



OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS

April 11, 2014

ALPHA GAMMA DELTA FOUNDATION, INC.
8710 N. MERIDIAN ST.
INDIANAPOLIS, IN 46260

Lisa Madigan
ATTORNEY GENERAL

RE: RE: Status of ALPHA GAMMA DELTA FOUNDATION, INC. under the Illinois Charitable Laws CO# 01041174

Dear Registrant:

This letter is pursuant to your request that the Attorney General confirm the status of ALPHA GAMMA DELTA FOUNDATION, INC. under the Charitable Organization Laws.

This organization is currently registered with the Attorney General's Charitable Trust and Solicitations Bureau as CO# 01041174. It is current in the filing of its financial reports, having filed its report for the period ended May 31, 2013. Please let us know if you require further information.

Sincerely,

Takuya Matsuo

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

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

PERMIT NUMBER:	2014-10		
GROUP NAME:	American Legion – Peoples Gas Post #336		
ADDRESS:	130 E. Randolph Dr., Chicago, IL 60601		
TELEPHONE NUMBER:	708-699-4705		
CONTACT PERSON:	Kevin Donahue		
DATE WRITTEN REQUEST WAS RECEIVED:	April 17, 2014		
SOLICITATION DATE:	May 22-23, 2014		
CITY COUNCIL DATE:	April 30, 2014		
COMPLETION OF FILE DATE:			
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:			
DATE PERMIT LETTER WAS SENT TO ORGANIZATION:	April 30, 2014		
<u>VIOLATION (S)</u>			
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: PEOPLES GAS POST #336, AMERICAN LEGION
Address: 130 E. RANDOLPH DR., CHICAGO, IL 60601
Telephone Number: (708) 699-4705
2. Use the space below to list names, current positions, residence addresses and telephone numbers of the officers in the organization:
COMMANDER: KEVIN P. DONAHUE
11924 S. LAWDALE AVE, ALSIP, IL 60808 (773) 466-2525
SR. VICE COMMANDER: THOMAS O'BRIEN, 459 W. 38th ST. CHICAGO, IL
(773) 503-8835
POPPY DAY CHAIRMAN: ANDREWS PRZYBYSZ 1205 FAIR OAKS. OAK, PARK, IL
(708) 699-4705 60302
3. List the date and approximate location(s) of solicitation:
THURSDAY MAY 22, 2014 AND
FRIDAY MAY 23, 2014 CITY WIDE
4. Approximately how many persons will be engaged in the solicitation?
TEN (10) VOLUNTEERS
5. Explain the methods your organization will use to solicit funds:
VOLUNTEERS WILL BE SOLICITING CONTRIBUTIONS FOR U.S.
HOSPITAL VETERANS ON THE SIDEWALK AREA OF
STREET CORNERS THROUGHOUT THE CITY.
6. Has your organization ever been allowed to solicit funds in prior years in the City of Chicago? If so, when?
YES, -2013
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.

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 Kerim P. Donahue Title COMMANDER Date 04-16-2014

Signature [Signature] Title CHAIRMAN
TOPPY DAY Date 04-16-2014

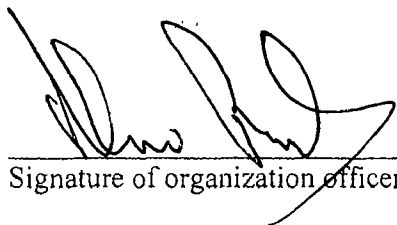
Signature _____ Title _____ Date _____

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.

PEOPLES GAS-POST #336 AMERICAN LEGION

Name of organization



Signature of organization officer

4-16-2014

Date

Ginoli & Company Ltd, CPA's
7625 N. University, Suite A
Peoria, Illinois 61614-8303
Phone (309) 671-2350 Fax (309) 671-5459

November 15, 2013

The American Legion of Illinois
P.O. Box 2910
Bloomington, IL 61702-2910

The American Legion of Illinois:

Enclosed is the organization's 2012 Exempt Organization return. The state Exempt Organization return is also enclosed. These should be signed, dated, and mailed, as indicated. *Done 11-19-13 H*

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-EO to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS.

ILLINOIS FORM AG990-IL RETURN:

Mail to - Office of the Attorney General
Charitable Trust Bureau
100 West Randolph St., 11th Floor
Chicago, IL 60601-3175 *mailed 11-19-13 H*

Please sign and mail Form AG990-IL on or before January 31, 2014.

Enclose a check for \$15.

Make check payable to Illinois Charity Bureau Fund.

Form IFC must be signed by the professional fundraiser and an officer or director of the organization.

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2012

A For the 2012 calendar year, or tax year beginning **AUG 1, 2012** and ending **JUL 31, 2013**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		C Name of organization THE AMERICAN LEGION OF ILLINOIS Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. BOX 2910 City, town, or post office, state, and ZIP code BLOOMINGTON, IL 61702-2910 F Name and address of principal officer: TERRY L WOODBURN same as C above		D Employer identification number E Telephone number (309) 663-0361 G Gross receipts \$ ████████████████████ H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶ 0925	
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c)(19) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		J Website: ▶ WWW.ILLEGION.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1919 M State of legal domicile: IL			
Part I Summary					

Summary		VETERAN AFFAIRS AND REHABILITATION, THE CARE AND PROTECTION OF THEIR CHILDREN AND TO	
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>VETERAN AFFAIRS AND REHABILITATION, THE CARE AND PROTECTION OF THEIR CHILDREN AND TO</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	31
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	31
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	21
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)		
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
14 Benefits paid to or for members (Part IX, column (A), line 4)			
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25)		0.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			
19 Revenue less expenses. Subtract line 18 from line 12			
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)		
	22 Net assets or fund balances. Subtract line 21 from line 20		

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date		
	TERRY L WOODBURN, ADJUTANT/FINANCE OFFICER Type or print name and title				
Paid	Print/Type preparer's name Robert Plier, CPA	Preparer's signature <i>Robert Plier</i>	Date 11/15/13	Check if self-employed <input type="checkbox"/>	PTIN P00909250
Preparer Use Only	Firm's name Ginoli & Company Ltd, CPA's			Firm's EIN	
	Firm's address 7625 N University Ste A Peoria, IL 61614-8303			Phone no. (309) 671-2350	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission: **None**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$) Including grants of \$ (Revenue \$)
VETERAN AFFAIRS AND REHABILITATION, THE CARE AND PROTECTION OF THEIR CHILDREN AND TO PRESERVE THE MEMORIES AND INCIDENTS OF PARTICIPATION IN THE GREAT WARS.

4b (Code:) (Expenses \$) Including grants of \$ (Revenue \$)

4c (Code:) (Expenses \$) Including grants of \$ (Revenue \$)

4d Other program services (Describe in Schedule O.)
 (Expenses \$) Including grants of \$ (Revenue \$)

4e Total program service expenses

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

PERMIT NUMBER:	2014-11		
GROUP NAME:	Polish Legion of American Veterans		
ADDRESS:	4934 N. Mason, Chicago, IL 60630		
TELEPHONE NUMBER:	773-725-1088		
CONTACT PERSON:	Mr. Eugene Beranek		
DATE WRITTEN REQUEST WAS RECEIVED:	April 17, 2014		
SOLICITATION DATE:	May 15-18, 2014		
CITY COUNCIL DATE:	April 30, 2014		
COMPLETION OF FILE DATE:			
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:			
DATE PERMIT LETTER WAS SENT TO ORGANIZATION:	April 30, 2014		
<u>VIOLATION (S)</u>			
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:** POLISH LEGION OF AMERICAN VETERANS U.S.A.
 4934 North Mason Avenue
 Address: Chicago, Illinois 60630-1913

 Telephone Number: 1 773 725 1088

2. **Use the space below to list names, current positions, residence addresses and telephone numbers of the officers in the organization:**
 Dave Johnson Commander Eugene E. Beranek Past Commander
 530 Fredrick Lane 4934 North Mason Avenue
 Hoffman Estates, Ill Chicago, Illinois 60630-1913
 60195
 1-847-882-9752 1-773-725-1088

3. **List the date and approximate location(s) of solicitation:**
 This will be for four Days different locations City wide
 Thur. May 15, 2014, Fri. May 16, 2014 Sat. May 17, 2014
 and Sun. May 18, 2014

4. **Approximately how many persons will be engaged in the solicitation?**
 There will be about 60 people at varius locations City Wide

5. **Explain the methods your organization will use to solicit funds:**
 we will be offering a POPPY for any donation to assist
 the Hospitalized Veterans

6. **Has your organization ever been allowed to solicit funds in prior years in the City of Chicago? If so, when?**
 We have been solicitating funds in the City of Chicago
 for over fifty years, some years on private property.

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 serve the Veterans Medical Centers at Hynes Illinois, North Chicago, West side Medical Center, we also assist at the Illinois Veterans Home in Manteno Illinois and at the Veterans Home in Quincy Illinois. We also assist the the USO at Navy Pier, OHare Airport and Midway Airport.

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

STANLEY BARABSZ POST 72

POLISH LEGION of AMERICAN VETERANS U.S.A.

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 1st Vice Comdr Date 02/15/14
Robert Ostrowski

Signature  Title Past Commander Date 02/15/14
Eugene E. Beranek Director

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.

STATE DEPARTMENT OF ILLINOIS

POLISH LEGION OF AMERICAN VETERANS U.S.A.

Name of organization



Signature of organization officer

Eugene E. Beranek Director and Past Commander

Date February 24, 2014



OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS

March 8, 2010

STATE DEPARTMENT OF ILLINOIS
POLISH LEGION OF AMERICAN
VETERANS, U.S.A
C/O EUGENE E BERANEK
4934 N MASON AVE
CHICAGO, IL 60630

Lisa Madigan
ATTORNEY GENERAL

RE: RE: Status of STATE DEPARTMENT OF ILLINOIS POLISH LEGION OF
AMERICAN VETERANS, U.S.A under the Illinois Charitable Laws
CO# 01015056

Dear Registrant:

This letter is pursuant to your request that the Attorney General confirm the status of
STATE DEPARTMENT OF ILLINOIS POLISH LEGION OF AMERICAN VETERANS,
U.S.A under the Charitable Organization Laws.

This organization is currently registered with the Attorney General's Charitable Trust and
Solicitations Bureau as CO# 01015056. It is current in the filing of its financial reports, having
filed its report for the period ended December 31, 2008. Please let us know if you require
further information.

Sincerely,

A handwritten signature in cursive script that reads "Ms Luz Guzman".

Luz Guzman, Office Assistant
Charitable Trusts Bureau
100 West Randolph Street, 11th Floor
Chicago, Illinois 60601
Telephone: (312) 814-2595



Polish Legion of American Veterans USA

Federal Charter - P.L. 98-372 on July 23, 1984

STANLEY BARABASZ POST # 72

COMMANDER

Dave Johnson
530 Fredrick Lane
Hoffman Estates, Illinois
1 847 882 9752

2ND. VICE COMMANDER

Larry Jakubowski
395 Fleming Lane
Schaumburg, Illinois 60103-2829
1 847 895 1422

ADJUTANT & DIRECTOR

Julianne Viduya
2402 North New England Avenue
Chicago, Illinois 60707-2104
1 773 622 6901

SERGEANT AT ARMS

Roger Oznoff
13140 Red Alder Avenue
Huntley, Illinois 60142
1 847 515 7406

1ST VICE COMMANDER

Robert Ostrowski
1142 South Asherns Avenue
Lombard, Illinois 60148-4043
1 630 495 1369

COMMANDER -EMERITUS

Frank Jurek
336 West Hending Street
Lombard, Illinois 60139
1 630 5139335

SERVICE OFFICER & SCRIBE

Paul R. Moreno
6111 North Navarre Avenue
Chicago, Illinois 60631-2613
1 773 775 1965

DIRECTOR & PAST COMDR

Eugene E. Beranek
4934 North Mason Avenue
Chicago, Illinois 60630-1913
1 773 725 1088

DIRECTOR

John Waskowski
3720 Liberty Lane
Glenview, Illinois
1 847 729 5029