



Office of Chicago City Clerk



Or2011-647

Office of the City Clerk

City Council Document Tracking Sheet

Meeting Date:	6/8/2011
Sponsor(s):	Burke, Edward (14)
Type:	Order
Title:	Tag Days
Committee(s) Assignment:	Committee on Finance

CHICAGO June 8, 2011

To the President and Members of the City Council:

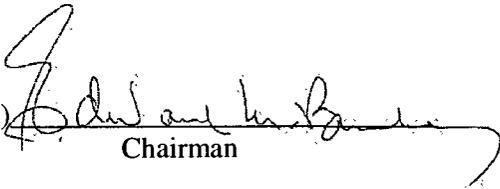
Your Committee on Finance having had under consideration one (1) order authorizing five (5) applications for City of Chicago Charitable Solicitation (Tag Day) permits.

- A. American Legion Illiana Post
- B. Jordyne Cares
- C. "Our Youth" A Community Forum
- D. Planned Parenthood Action Fund, Inc.
- E. Planned Parenthood Federation of America, Inc.

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).

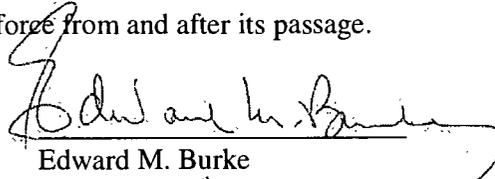
Respectfully submitted

(signed)  Chairman

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

- A. American Legion Illiana Post
May 26-29, 2011
Citywide
- B. Jordyne Cares
June 11, 2011
Citywide
- C. "Our Youth" A Community Forum
Saturdays from May 28, 2011 through August 13, 2011
Citywide
- D. Planned Parenthood Action Fund, Inc.
June 8, 2011 through June 30, 2011
Citywide
- E. Planned Parenthood Federation of America, Inc.
July 1, 2011 through August 31, 2011
Citywide

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


Edward M. Burke
Alderman, 14th Ward

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

PERMIT NUMBER:	2011-23	
GROUP NAME:	American Legion Illiana Post	
ADDRESS:	10506 South Ewing Avenue, Chicago, IL 60617	
TELEPHONE NUMBER:	773-734-3856	
CONTACT PERSON:	John Clarke, Jr.	
DATE WRITTEN REQUEST WAS RECEIVED:	May 25, 2011	
SOLICITATION DATE:	May 26-29, 2011	
CITY COUNCIL DATE:	June 8, 2011	
COMPLETION OF FILE DATE:		
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:		
DATE PERMIT LETTER WAS SENT TO ORGANIZATION:	May 25, 2011	
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: American Legion Illiana Post 
Address: 10506 S. Ewing, Chicago, IL 60617
Telephone Number: 773-734-3856

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

John Clark, Jr. ^{Gen. Sec.} VP	Margaret Kramer, Pres.
11222 S. Ewing Ave	Women's Auxiliary
Chicago, IL 60617	11201 S. Green Bay
773-734-3856	773-731-6698

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

May 26 & 27, ~~2010~~ 2011 108 & State Line 106 & Ave L
106, 108, 112, 102 & Ewing 106 & Ave C

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

- 10 -

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

Standing along road w/ cans & vest
soliciting donations for Veterans in Nursing Homes & Hospitals

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

Since the 1980's.

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 *John J. Clark* Title *J. Vice President* Date *5/25/11* *g*

Signature _____ Title _____ Date _____

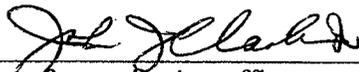
Signature _____ Title _____ Date _____

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.

American Legion Illiana Post

Name of organization



Signature of organization officer

John Clarke, Jr.

05-25-2011

Date

Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2009

Form **990-EZ**

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

Department of the Treasury
Internal Revenue Service

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.
▶ **The organization may have to use a copy of this return to satisfy state reporting requirements.**

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning JUL 1, 2009 and ending JUN 30, 2010

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	Please use IRS label or printer type. See Specific Instructions.	C Name of organization AMERICAN LEGION POST #220 Number and street (or P.O. box, if mail is not delivered to street address) Room/suite 10506 S. EWING AVE. City or town, state or country, and ZIP + 4 CHICAGO, IL 60617	O Employer identification number 36-6092880 E Telephone number 773-734-3856 F Group Exemption Number ▶
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• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method: Cash Accrual
Other (specify) ▶

I Website: ▶ N/A

H Check if the organization is not

J Tax-exempt status (check only one) — 501(c)(19) 4947(a)(1) or 527

required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	2	Program service revenue including government fees and contracts				
	3	Membership dues and assessments				
	4	Investment income				
	Sa	Gross amount from sale of assets other than inventory	Sa			
	b	Less: cost or other basis and sales expenses	Sb			
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c			
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>				
	a	Gross revenue (not including \$ of contributions reported on line 1)	6a			
Expenses	b	Less: direct expenses other than fundraising expenses	6b			
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c			
	7a	Gross sales of inventory, less returns and allowances	7a			
	b	Less: cost of goods sold	7b			
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c			
	8	Other revenue (describe ▶ SEE STATEMENT 2)	8			
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9			
	Net Assets	10	Grants and similar amounts paid (attach schedule)	10		
		11	Benefits paid to or for members	11		
12		Salaries, other compensation, and employee benefits	12			
13		Professional fees and other payments to independent contractors	13			
14		Occupancy, rent, utilities, and maintenance	14			
15		Printing, publications, postage, and shipping	15			
16		Other expenses (describe ▶ SEE STATEMENT 1)	16			
17		Total expenses. Add lines 10 through 16	17			
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18				
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19				
20	Other changes in net assets or fund balances (attach explanation)	20				
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21				

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments		
23 Land and buildings		
24 Other assets (describe ▶)		
25 Total assets		
26 Total liabilities (describe ▶)	0	
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)		

932171
02-08-10

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2009)

Statement of Program Service Accomplishments (See the instructions for Part III.)

Expenses

What is the organization's primary exempt purpose? AMERICAN LEGION POST
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28 AMERICAN LEGION POST
(Grants \$) If this amount includes foreign grants, check here
29
(Grants \$) If this amount includes foreign grants, check here
30
(Grants \$) If this amount includes foreign grants, check here
31 Other program services (attach schedule)
(Grants \$) If this amount includes foreign grants, check here
32 Total program service expenses (add lines 28a through 31a)

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

Table with 5 columns: (a) Name and address, (b) Title and average hours per week devoted to position, (c) Compensation (if not paid, enter -0-), (d) Contributions to employee benefit plans & deferred compensation, (e) Expense account and other allowances. Rows include LARRY PARKER, FRANCIS DEMARCO, JOHN CLARKE, KENNETH PETERS, JOSEPH SCHUETTER, JOHN VELGOS, SR.

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

PERMIT NUMBER:	2011-24		
GROUP NAME:	Jordyne Cares		
ADDRESS:	1642 E. 56 th , Chicago, IL 60637		
TELEPHONE NUMBER:	773-675-1053		
CONTACT PERSON:	Marc Pullins		
DATE WRITTEN REQUEST WAS RECEIVED:	May 25, 2011		
SOLICITATION DATE:	June 11, 2011		
CITY COUNCIL DATE:	June 8, 2011		
COMPLETION OF FILE DATE:			
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:			
DATE PERMIT LETTER WAS SENT TO ORGANIZATION:	June 9, 2011		
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: *Jordyne Cares*
Address: *1642 East 56th Street*
Telephone Number: *773-675-1053*
2. Use the space below to list names, current positions, residence addresses and telephone numbers of the officers in the organization:
Marc Pullins 1642 E 56th 773-791-1850
Loretta Jones 1642 E 56th 773-791-6674
Angela Lockett 1929 S. 11th Ave Maywood 6053 312-437-0730
Julie Bassel 619 E. 83rd place 60617 773-406-0600
Deirdre Pullins 1642 E 56th dr. Ill. 773-230-4871
3. List the date and approximate location(s) of solicitation:
June 11, 2011 — Citywide
4. Approximately how many persons will be engaged in the solicitation?
50-75
5. Explain the methods your organization will use to solicit funds:
Donation Cannisters at intersections throughout Ayle Park
6. Has your organization ever been allowed to solicit funds in prior years in the City of Chicago? If so, when?
Yes. July 31, 2010
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 Marc A. Pulli Title Executive Director Date 5-6-11

Signature _____ Title _____ Date _____

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.

Jordyne Cares NFP
Name of organization

Marc A. Pulli
Signature of organization officer

5-6-11
Date

CHARITABLE ORGANIZATION - REGISTRATION STATEMENT -

LISA MADIGAN
ATTORNEY GENERAL

PLEASE TYPE OR PRINT IN INK. This registration statement is required by the Illinois Charitable Trust Act and the Illinois Solicitation for Charity Act. Please answer all items which are applicable to your organization. If you are unable to answer any question fully in the space provided, please attach a sheet containing the remainder of your answer. No further registration statement is required, provided that every registered organization shall notify the Attorney General within 10 days of any change in the information submitted herein. One copy of this Registration Statement and attachments are to be filed with the Office of the Attorney General, Charitable Trust and Solicitations Bureau, 100 West Randolph Street, 11th Floor, Chicago, Illinois 60601

RECEIVED

DEC 01 2008

ATTORNEY GENERAL
CHARITABLE TRUST

1. This is a registration under:
- Illinois Charitable Trust Act;
 - Illinois Solicitation for Charity Act;
 - Both Acts

2. Name of Organization Telephone Number Federal Employer ID#

Jordyne Cares
 Street and Number City County State Zip Code
1642 E. 56th Chicago Cook IL 60637

3. Type of legal entity (Corporation, Trust, Unincorporated Association or other) and date, method and place organization legally established. Corporation 9-30-08

If a foreign corporation, when was it authorized to do business in Illinois? _____

If a corporation, Illinois Secretary of State's File No. _____

*A copy of the Articles of Incorporation or Certificate of Authority issued by the Secretary of State must be attached.

4. Name, address and telephone number of Illinois registered agent Marc Anthony Pullins
1642 E 56th Chicago IL 60637 773-791-7830

5. Address of all offices in the State of Illinois. 1642 E 56th Chicago IL 60637

6. Date on which the annual accounting period of the organization ends. Month 7 Day 09

7. State the purposes of the organization and purposes for which contributions are to be used. (Be specific)
Jordyne Cares is dedicated to easing the burdens of families dealing with the loss of a chronically ill child by helping absorb cost of final expenses, and by helping to provide counseling, so that they may be able to move forward with dignity.

8. If the name under which the organization intends to solicit funds differs from the name listed in No.2 provide name(s) under which contributions will be solicited, and the reason for the use of such other name(s). ~~_____~~

9. If the organization has previously been registered with the Attorney General under either Act, give the name under which registered (if different than shown in No. 2), last registration number, and date registered. N/A

10. Has the organization been registered with any other governmental authority to solicit contributions? Yes No
 Name of authority and date of authorization. _____
 Is such registration current? Yes No

11. Has the organization or any of its officers, directors or trustees ever been enjoined or prohibited by any court or other governmental agency from soliciting contributions, or is such action pending? Yes No
 If "Yes", attach an explanation.

12. Do you intend to use the services of a professional fund raiser as defined by "An Act to Regulate Solicitation and Collection of Funds for Charitable Purposes"? Yes No
 If "Yes", answer a, b, and comply with c below.
 a. Name and address of professional fund raiser(s): NA

b. Has the professional fund raiser registered and filed a bond with the Office of the Attorney General as required? Yes No
 c. Attach copies of all contracts with professional fund raiser(s).

13. Have any of organization's officers, directors, executive personnel, or have any of the organization's employees who have access to funds, ever been charged with or convicted of a misdemeanor involving misapplication or misuse of money of another, or any felony? Yes No If "Yes", give the following information: (IRS 1981 ch. 23, sec. 5109)

NAME AND ADDRESS OF COURT	NATURE OF OFFENSE	DATE OF CONVICTION (Mo./Yr.)
<u>NA</u>		

14. State the board, group or individual having final discretion as to the distribution and use of contributions received.
Marc A. Pullins, Deirdre C. Pullins

15. Will you use any of the following methods of solicitation?
 Telephone Appeals Coin Collection Containers Unordered Merchandise Special Events Distribution or Sale of Seals Ad Books Direct Mail
 Other --- If other, attach an explanation.

16. List name, mailing address and title of the chief executive or staff officer of the organization. Marc Anthony Pullins
1642 E 56th Chicago IL 60637 apt 1104

17. Attach a list of names, mailing addresses, and daytime phone numbers of all officers and directors, or trustees of the organization.

18. Has the United States Internal Revenue Service determined that this organization is tax exempt? Yes No
 If "Yes", attach a copy of the determination letter. Is application pending? Yes No
 *All organizations with tax exempt status or an application pending must attach a copy of Federal Form 1023 "Application for Recognition of Exemption" or an exemption letter.

19. Has organization's tax exempt status ever been questioned, audited, denied or cancelled at any time by any governmental agency?
 Yes No If "Yes", attach the facts.

20. Organizations which have been in operation for over one (1) year must attach a copy of the form AG990-IL and Federal return, or AG990IL if no Federal return was filed for each year the organization was in existence, completed in detail. Organizations which have been in operation less than one (1) year must attach a completed Financial Information Form CO-2, notarized. Please note charitable organization's are required to maintain accurate and detailed accounting records.

21. Approximate amount of contributions solicited or income received from persons in this State during the organization's last annual accounting period \$ _____

22. EVERY REGISTERING ORGANIZATION MUST ATTACH THE FOLLOWING APPLICABLE DOCUMENTS:
 Corporation.....The Articles of Incorporation and/or Certificate of Authority, Amendments and By-Laws
 Unincorporated Association.....Constitution and By-Laws
 Testamentary Trust.....Will, Probate number and Decree of Distribution
 Inter Vivos Trust.....Instrument Creating Trust

Note: The President and the Chief Financial Officer or other authorized officer both are required to sign. This must be two different individuals. If entity is a Trust, all Trustees must sign.

UNDER PENALTY OF PERJURY, THE UNDERSIGNED DECLARE AND CERTIFY THAT THE INFORMATION CONTAINED IN THIS STATEMENT AND ALL ATTACHED SHEETS IS TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE.

Signature <u>Marc A. Pullins</u>	Title <u>Director</u>	Date <u>10-8-08</u>
Signature <u>Deirdre C. Pullins</u>	Title _____	Date <u>10.8.08</u>

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

PERMIT NUMBER:	2011-25
GROUP NAME:	"Our Youth" A Community Forum
ADDRESS:	7940 S. Ashland, Chicago, IL 60636
TELEPHONE NUMBER:	773-719-1771
CONTACT PERSON:	Lynda Green
DATE WRITTEN REQUEST WAS RECEIVED:	May 25, 2011
SOLICITATION DATE:	Saturdays from May 28, 2011 through August 13, 2011
CITY COUNCIL DATE:	June 8, 2011
COMPLETION OF FILE DATE:	
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:	
DATE PERMIT LETTER WAS SENT TO ORGANIZATION:	June 9, 2011
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: "Our Youth" A Community Forum
Address: 7440 S. Ashland
Telephone Number: (773) 719-1771

2. Use the space below to list names, current positions, residence addresses and telephone numbers of the officers in the organization:
Lynda V. Green ^{President} Executive Director 9055 S. Carpenter Chgo Il. 60628
Barbara Giles 3933 W. 185th Plache Homewood Il. 60430
Audrey Barrett Sect. 14725 S. Vine #111 Harvey Il. 60426

3. List the date and approximate location(s) of solicitation:
~~5/28~~ ~~6/4~~ 5/28 6/4 6/11 6/18 7/2 7/9
7/16 7/30 8/6 8/13 95th Western Ave. Chicago / Evergreen

4. Approximately how many persons will be engaged in the solicitation?
4-12

5. Explain the methods your organization will use to solicit funds:
Signs will be used with the name of our organization on them

6. Has your organization ever been allowed to solicit funds in prior years in the City of Chicago? If so, when? NO Never applied

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 Lynda V. Green Title President Date 4/19/2011

Signature _____ Title _____ Date _____

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.

"Our Youth" A Community Forum
Name of organization

Lynda V. Green
Signature of organization officer

April 19, 2011
Date

"Our Youth" A Community Forum

Ages Serviced 13-25

The purpose of this organization is to enhance as well as promote the inner ability of each young person and not to focus on the negative challenges that they are faced with daily. Our goal is to initiate a Proactive plan which will give them a list of positive choices instead of a life time of disappointment because of unconstructive decisions. The following services and programs that will be offered are:

- Resume writing/Job Readiness
- STD's/AIDS Workshops/Healthy Communication
- Young entrepreneurs program
- Self Esteem Awareness/Dress Code
- Crime awareness prevention
- Community hours needed for graduation
- Historical trips that Educate
- Financial workshops/budgeting/investments

And much more!

Please contact Mrs. Green@ (773) 719-1771 for more information
Mr. Cardell Hampton @ (773) ouryouthforum@gmail.com



OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS

January 8, 2010

OUR YOUTH--A COMMUNITY FORUM, NFP
9055 S. CARPENTER AVE.
CHICAGO, IL 60620

Lisa Madigan
ATTORNEY GENERAL

RE: Status of OUR YOUTH--A COMMUNITY FORUM, NFP under both The Charitable Trust and The Solicitation for Charity Acts.

Dear Registrant:

I am pleased to acknowledge receipt of your registration statement under both the Charitable Trust and the Solicitation for Charity Acts. The registration number assigned to your organization is CO# 01057534.

Please note that when an organization registers under the Charitable Trust and/or the Solicitation for Charity Act, it is required to file an annual financial report with our office. The annual financial report is due six months after the end of the organization's fiscal year. It is one of the duties of the organization's officers to ensure that this report is timely filed. A copy of the form AG990-IL along with instructions are attached to this letter.

I must also call your attention to Section 12 under the Solicitation for Charity Act. Please note that this registration in no way constitutes an endorsement of your organization by the State of Illinois and that any representation as such for the purpose of soliciting or collecting funds will be grounds for cancellation of your registration.

For your convenience, additional resource materials as well as blank forms and instructions are available under the "Building Better Charities" section of our website at www.IllinoisAttorneyGeneral.gov. If you have questions, you may direct them by mail to the Charitable Trusts Bureau at 100 West Randolph Street, 11th floor, Chicago, Illinois 60601; or contact us by phone at (312) 814 - 2595. We will be happy to assist you.

Very truly yours,

A handwritten signature in black ink that reads "Lisa Madigan".

LISA MADIGAN
Attorney General

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

DEPARTMENT OF THE TREASURY

Date: **AUG 20 2010**

OUR YOUTH - A COMMUNITY FORUM NFP
C/O LYNDA GREEN
9055 S CARPENTER AVE
CHICAGO, IL 60620

Employer Identification Number:
80-0310378
DLN:
17053335327029
Contact Person:
MARY M SHEER ID# 31255
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:
January 16, 2009
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.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)

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

PERMIT NUMBER:	2011-26		
GROUP NAME:	Planned Parenthood Action Fund, Inc.		
ADDRESS:	59 Temple Place, Suite 402, Boston, MA 02111		
TELEPHONE NUMBER:	269-599-4398		
CONTACT PERSON:	Cecile Richards		
DATE WRITTEN REQUEST WAS RECEIVED:	May 25, 2011		
SOLICITATION DATE:	June 8-30, 2011		
CITY COUNCIL DATE:	June 8, 2011		
COMPLETION OF FILE DATE:			
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:			
DATE PERMIT LETTER WAS SENT TO ORGANIZATION:	June 9, 2011		
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 Action Fund, Inc.
Grassroots Campaigns, Inc. will be handling the solicitation
Address: 59 Temple Place Ste 402, Boston, MA 02111
Telephone Number: 617-338-7800
2. Use the space below to list names, current positions, residence addresses and telephone numbers of the officers in the organization:
Cecile Richards, President
434 W. 33rd ST, New York, NY 10001
212-541-7800
3. List the date and approximate location(s) of solicitation? June 8 - June 30
We will be soliciting from ~~May 2011~~ through ~~December 2011~~. We
will have representatives in 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?
We will have approximately 15-20 representatives actively engaged.
5. Explain the methods your organization will use to solicit funds:
We will speak to people who choose to stop to talk to us
about Planned Parenthood Federation of America's programs.
6. Was your organization ever allowed to solicit funds in prior years in the City of Chicago? If so, when?
This is our first application
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.
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 *Andra Robinson* Title CDO & V.P. Date 4-27-11

Signature _____ Title _____ Date _____

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 Action Fund, Inc
Name of organization


Signature of organization officer

4-27-11
Date



October 5, 2010

OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS

PLANNED PARENTHOOD ACTION
FUND, INC.
434 W 33RD STREET
NEW YORK, NY 10001

Lisa Madigan
ATTORNEY GENERAL

RE: RE: Status of PLANNED PARENTHOOD ACTION FUND, INC. under the Illinois
Charitable Laws
CO# 01021418

Dear Registrant:

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

This organization is currently registered with the Attorney General's Charitable Trust and
Solicitations Bureau as CO# 01021418. It is current in the filing of its financial reports, having
filed its report for the period ended June 30, 2009. Please let us know if you require fiather
information.

Sincerely,

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

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

PERMIT NUMBER:	2011-27		
GROUP NAME:	Planned Parenthood Federation of America, Inc.		
ADDRESS:	59 Temple Place, Suite 402, Boston, MA 02111		
TELEPHONE NUMBER:	269-599-4398		
CONTACT PERSON:	Cecile Richards		
DATE WRITTEN REQUEST WAS RECEIVED:	May 25, 2011		
SOLICITATION DATE:	July 1, 2011 through August 31, 2011		
CITY COUNCIL DATE:	June 8, 2011		
COMPLETION OF FILE DATE:			
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:			
DATE PERMIT LETTER WAS SENT TO ORGANIZATION:	June 9, 2011		
VIOLATION (S)			
COMMITTEE LETTER SENT:			
COMPLY RECEIVED:			
COMMENTS:			

APPLICATION FOR COPY 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, Inc.
Grassroots Campaigns, Inc. will be handling the solicitation*
Address: *59 Temple Place Ste 402, Boston, MA 02111*
Telephone Number: *617-338-7800 312263-0435*
2. Use the space below to list names, current positions, residence addresses and telephone numbers of the officers in the organization:
*Cecile Richards, President
434 W. 33rd St, New York, NY 10001
212-541-7800*
3. List the date and approximate location(s) of solicitation? *July 1 - August 31, 2011*
We will be soliciting from ~~May 2011 through December 2011~~. We will have representatives in 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?
We will have approximately 15-20 representatives actively engaged.
5. Explain the methods your organization will use to solicit funds:
We will speak to people who choose to stop to talk to us about Planned Parenthood Federation of America's programs
6. Was your organization ever allowed to solicit funds in prior years in the City of Chicago? If so, when?
Yes. July - December 2010
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.
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 *Scotty Johnson* Title COO & VP Date 4-27-11

Signature _____ Title _____ Date _____

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, Inc
Name of organization

Jordan Sedam
Signature of organization officer

4-27-11
Date



OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS

October 5, 2010

PLANNED PARENTHOOD
FEDERATION OF AMERICA, INC.
434 W. 33RD STREET
NEW YORK, NY 10001

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# 01009083. It is current in the filing of its financial reports, having
filed its report for the period ended June 30, 2009. Please let us know if you require further
information.

Sincerely,

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