



City of Chicago

Office of the City Clerk

Tracking Sheet



Or2011-65

Meeting Date:	1/13/2011
Status:	Passed
Sponsor(s):	Burke, Edward (14)
Type:	Order
Title:	Tag Days
Committee(s) Assignment:	Committee on Finance

CHICAGO January 13, 2011

To the **President and Members of the City Council:**

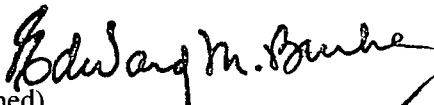
Your Committee on Finance having had under consideration one (1) ~~proposed~~ order authorizing one (1) application for City of Chicago Charitable Solicitation (Tag Day) permits.

A. BrightStar of Chicago

having had the same under advisement, begs leave to report and recommend that your Honorable Body pass the proposed 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)).

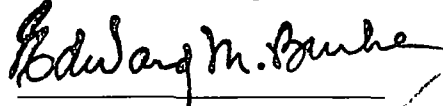
Respectfully submitted


(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. BrightStar of Chicago
 January 16, 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 CHARITABLE SOLICITATION
TAG DAY REQUEST FORM AND ROUTE SHEET**

PERMIT NUMBER:	2011-1		
GROUP NAME:	BrightStar of Chicago		
ADDRESS:	430 W. Erie, Suite 403, Chicago, IL 60654		
TELEPHONE NUMBER:	312-382-8888		
CONTACT PERSON:	Cheri McEssy		
DATE WRITTEN REQUEST WAS RECEIVED:	December 20, 2010		
SOLICITATION DATE:	January 16, 2011		
CITY COUNCIL DATE:	January 12, 2011		
COMPLETION OF FILE DATE:			
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:			
DATE PERMIT LETTER WAS SENT TO ORGANIZATION:	January 13, 2011		
<u>VIOLATION (S)</u>			
COMMITTEE LETTER SENT:			
COMPLY RECEIVED:			
COMMENTS:			

1. **Name of Organization:** CMC Ventures, LLC doing business as BrightStar of Chicago
Address: 430 W. Erie Street, Suite 403, Chicago, IL 60654
Telephone Number: 312.382.8888

Name of Organization: Alzheimer's Association, Greater Illinois Chapter
Address: 8430 W. Bryn Mawr Avenue, Suite 800, Chicago, IL 60631
Telephone Number: 847.993.2413

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

CMC Ventures, LLC

Name: Cheri McEssy, President and Owner

Residence Address: 1301 W. Ohio Street, Chicago, IL 60642

Telephone: 312.203.6901

Alzheimer's Association, Greater Illinois Chapter

Name: Douglas Adolph, Senior Manager of Special Events

Residence Address: 8430 W. Bryn Mawr Avenue, Suite 800, Chicago, IL 60631

Telephone: 847.779.6953

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

City wide on January 16, 2011

4. **Approximately how many people will be engaged in the solicitation**

4-5 persons

5. **Explain the methods you organization will use the solicit funds**

We will ask for a donation to the Alzheimer's Association. We will provide donated coffee regardless of whether or not a donation is given.

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

Yes, CMC Ventures, LLC was granted a Tag Day permit on December 14, 2010 and January 4, 2011.

Yes, Alzheimer's Association, Greater Illinois Chapter solicits each spring for our Tag Days

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.**



Illinois Department of Revenue

Office of Local Government Services
Sales Tax Exemption Section, 3-520
101 W. Jefferson Street
Springfield, Illinois 62702
217 782-8881

March 21, 2008

ALZHEIMERS DISEASE & RELATED DISORDERS ASSN
CHICAGO AREA CHAPTER
8430 W BRYN MAWR STE 800
CHICAGO IL 60631

We have received your recent letter; and based on the information you furnished, we believe

ALZHEIMERS DISEASE & RELATED DISORDERS ASSN
of
CHICAGO, IL

is organized and operated exclusively for charitable purposes.

Consequently, sales of any kind to this organization are exempt from the Retailers' Occupation Tax, the Service Occupation Tax (both state and local), the Use Tax, and the Service Use Tax in Illinois.

We have issued your organization the following tax exemption identification number: E9983-6394-05. To claim the exemption, you must provide this number to your suppliers when purchasing tangible personal property for organizational use. This exemption may not be used by individual members of the organization to make purchases for their individual use.

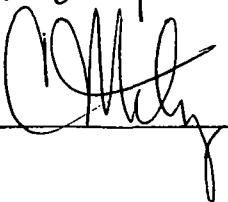
This exemption will expire on November 1, 2011, unless you apply to the Illinois Department of Revenue for renewal at least three months prior to the expiration date.

Office of Local Government Services
Illinois Department of Revenue

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 Sr. Manager, Date 11/24/10
Alzheimer's Association

Signature  Title President Date 12-20-10

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.

Bright Star Chicago
Name of organization

[Signature]
Signature of organization officer

12-10-10
Date