



Office of the City Clerk

City Hall
121 N. LaSalle St.
Room 107
Chicago, IL 60602
www.chicityclerk.com

Legislation Details (With Text)

File #: Or2015-105
Type: Order
Status: Passed
File created: 3/18/2015
In control: City Council
Final action: 3/18/2015
Title: Tag day permit(s) for Misericordia Heart of Mercy; and Pro Se Services
Sponsors: Burke, Edward M.
Indexes: TAG DAYS
Attachments: 1. Or2015-105.pdf

Date	Ver.	Action By	Action	Result
3/18/2015		City Council	Passed	Pass
3/16/2015	1	Committee on Finance	Recommended to Pass	
3/16/2015	1	Committee on Finance	Direct Introduction	

. CHICAGO March 18. 2015

To the President and Members of the City Council:

Your Committee on Finance having had under consideration one (1) order authorizing two (2) applications for City of Chicago Charitable Solicitation (Tag Day) permits.

A. Misericordia Heart of Mercy

B. Pro Se Services

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 (Cviva voce vote^
of the members of the committee with dissenting vote(s)).

Respectfully submitted

L--A
(signed^P") >A>>

Chairman j

v ±^ ^

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. Misericordia Heart of Mercy May 1-3, 2015
Citywide
- B. Pro Se Services
April 1,3, 10, 18,21,25, 30, 2015 Citywide

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

jj^> (jt-J G~J^ ^^jU-JL^ ,
Edward M. Burke) Alderman, 14th Ward '

Document No.

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

PERMIT NO. 2015-02^
HON /V)

PERMIT NUMBER: 2015-02
GROUP NAME: Misericordia Heart of Mercy

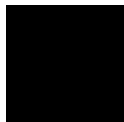
ADDRESS: 6300 N. Ridge Blvd, Chicago, IL 60660

TELEPHONE NUMBER: 773-973-6300

CONTACT PERSON: Sister Rosemary Connelly

DATE WRITTEN REQUEST WAS RECEIVED: February 4, 2015

SOLICITATION DATE: May 1-3,2015



CITY COUNCIL DATE: March 18,2015
COMPLETION OF FILE DATE:
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:
DATE PERMIT LETTER WAS SENT TO ORGANIZATION: March 18, 2015

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.)

L Name of organization: fYl/Ju&ZY~^/^\ 7c

Add™: & ^ M, /ft W» *J Telephone Number: ~J

~J ^} - "7 ' ^// b (3

2. Use the space below to list names, current positions, residence addresses and -|. 4
2. telephone-numbers of the officers in the organization^ /-,. IS. k~e f

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

/, Zr 3_y 2*)/r rfJ/^fAj he/*/

4. Approximately how many persons will be engaged in the solicitation?
*^#)pU- in^y 3 pes?**
5. Explain the methods your organization will use to solicit funds:
6. Has your organization ever been allowed to solicit funds in prioryears in the City of Chicago? If so, when?
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

Signature

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.

Name of organization

OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS

MISERICORDIA HOME 6300 N. RIDGE ROAD CHICAGO, IL 60660

RE: RE: Status of MISERICORDIA HOME under the Illinois Charitable Laws CO# 01040984 Dear
Registrant:

This letter is pursuant to your request that the Attorney General confirm the status of MISERICORDIA HOME under the Charitable Organization Laws.

This organization is currently registered with the Attorney General's Charitable Trust and Solicitations Bureau as CO# 01040984, and has been granted religious exemption from filing annual financial reports with our office. Please let us know if you require further information.

Sincerely,

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

Misericordia Candy Days

Last Friday a Saturday
in April

VOLUNTEER

773-273-2768

WWW.MISERICORDIA.ORG <<http://WWW.MISERICORDIA.ORG>>

DONATE \$5

Text MIS to
25383

r -?

Last Friday
8c SATURDAY

in April

VOLUNTEER

-j---; ^r- ■ -c- c ■

I ■■■■

773-273-2768

WWW.MISERICORDIA.ORG <<http://WWW.MISERICORDIA.ORG>>

DONATE \$5

Text MIS to
25383

PERMIT NO. 2015-03

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

PERMIT NUMBER: 2015-03

GROUP NAME Pro Se Services

ADDRESS: 937 South LaGrange Road, P.O. Box 564, LaGrange, IL 60525

TELEPHONE NUMBER: 708-368-5515

CONTACT PERSON: Dinae Knox

DATE WRITTEN REQUEST WAS RECEIVED: February 4, 2015

SOLICITATION DATE: April 1, 3, 10, 18, 21, 25, 30, 2015

CITY COUNCIL DATE: March 18, 2015

COMPLETION OF FILE DATE:

STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:

DATE PERMIT LETTER WAS SENT TO ORGANIZATION: March 18, 2015

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: Pro Se Services

Address: 937 S- La Grange Road / P.O. Box

<http://P.O. Box>, Chicago, IL

Telephone Number:

(708) 368-5515

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

- 0, L Jdmara UcFarland C\fp),m3 Rabun Dr, Douglasvillt, G A 3ol 33
3. List the date and approximate location(s) of solicitation:
- W^j Daf^S : Icia^ In the mon4ln Ap,;! Hois ^ pnl I *> Apr.I 3o, zois)
- ?^,^o j loQiftonS'-eowress/Stolrt +o Wacker/S-kte Sh]|V DownWn Chicago
- Oh^o/Michigan -Vo Delaware/Michigan Atenue. J ^ piWfl^fenl
4. Approximately how many persons will be engaged in the solicitation? ^; j e ^rga-

volunteers

5. Explain the methods your organization will use to solicit funds:
- 'Our aocd i's. rio+ to Soli'c.'-r hitnds, per se, bu+ to pass tuir t into wrdst ribbons to rafet awareness o*cH,'»d abu^pre^nfro • uoould l.'kjtTB toe abl* +o colled donations, \f citizens, of Chicago ux/u(cl +o suppo rln
6. Has your organization ever been allowed to solicit funds in prior years in the ° ar
- caU4,£1 City of Chicago? If so, when?

[Jo. FiVs+ -hVYte a-pp\ua^

- , 7. Include the following with your application:
- V^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.

/liWWd fl-Ljer /i'nfe abcu+ even4-

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.)

fWflUrrf

Date <2j 12/2-01^

Signature_

Signature

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.

Name of organization

Date

January 30, 2015

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

PRO SE SERVICES, NFP

P O BOX 564
LAGRANGE, IL 60525

Lisa Madigan
ATTORNEY GENERAL

RE: RE: Status of PRO SE SERVICES, NFP under the Illinois Charitable Laws CO#
01052752

Dear Registrant:

This letter is pursuant to your request that the Attorney General confirm the status of PRO SE SERVICES, NFP under the Charitable Organization Laws.

This organization is currently registered with the Attorney General's Charitable Trust and Solicitations Bureau as CO# 01052752. It is current in the filing of its financial reports, having filed its report for the period ended December 31, 2013. 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

Page 1 of 1

<http://www.ocfcpcourts.us/assets/UploaoVImages/blue_ribbon_000725.png>

'..V" ,..■■:■»..■■-...:■ -

Blue Ribbon

Child Abuse Prevention Campaign

Sponsored by

CHICAGO

-.LOOP
W ALLIANCE
DINAE KNOX
CHICAGO

DINAE KNOX

CHICAGO

Campaign Manager: Dinae Knox
Post Office Box 564

La Grange, IL 60525 (708) 368-5515 mobile (708) 469-1674 fax dk@clinaeknox.com
<<mailto:dk@clinaeknox.com>>www.dinaeknox.com/philanthropy <<http://www.dinaeknox.com/philanthropy>>

April Marks Child Abuse Prevention Month

Activities Highlight Efforts to Protect Children and Strengthen Families

April is National Child Abuse Prevention Month and Pro Se Services, NFP. is partnering with the Illinois Department of Children and Family Services, Prevent Child Abuse Illinois, and several organizations throughout Illinois to raise awareness about the role everyone can play in valuing children and strengthening families.

Thousands of Illinois children suffer abuse and neglect every year. In FY 2014, there were 92,904 children reported as possible victims of abuse and/or neglect. The Illinois Department of Children and Family Services found that 29,926 children were maltreated, and of those, 94 children died as a result of abuse and neglect.

The statistics can be overwhelming, but they are reminders that no one can afford to look the other way. Everyone can find a way to make a difference so that children reach their potential. The 2014 Pro Se Services Abuse Prevention month theme, Confronting Child Abuse and Neglect while Strengthening Families, promotes the need for meaningful involvement by parents, concerned individuals, communities, and organizations.

Child Abuse Prevention Month activities across the City of Chicago will include: •i* The tying of blue ribbon and planting of pinwheel "gardens" by organizations, schools and businesses throughout Chicago, including the Gateway Garden at Lake Street/Wacker on State Street. The BLUE RIBBON and PINWHEEL is the new symbol for child abuse prevention and reflects childhood hope, health and happiness.

For a list of partnering organizations and activities for your local community, visit www.dinaeknox.com/philanthropy <<http://www.dinaeknox.com/philanthropy>>

* WEAR SOMETHING BLUE on April 1st, to raise awareness for City's most vulnerable citizens - our children. Advocates for children throughout Illinois will show support by wearing blue, which is the official color of child abuse and neglect prevention.

For more information on how to keep children safe from abuse and neglect, visit www.dinaeknox.com/Dh philanthropy <<http://www.dinaeknox.com/Dh philanthropy>>. <<http://www.illinois.gov/dcfs/Pages/default.asDx>>. or www.preventchildabuseillinois.org <<http://www.preventchildabuseillinois.org>> or call the Illinois Child Abuse Hotline at 1-800-25-ABUSE