



# Office of the City Clerk

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

## Legislation Details (With Text)

**File #:** Or2015-637  
**Type:** Order  
**Status:** Passed  
**File created:** 10/14/2015  
**In control:** City Council  
**Final action:** 10/14/2015  
**Title:** Tag day permit(s) for Doctors Without Borders/Medecins Sans Frontieres and Planned Parenthood Federation of America, Inc.  
**Sponsors:** Burke, Edward M.  
**Indexes:** TAG DAYS  
**Attachments:** 1. Or2015-637.pdf

Date	Ver.	Action By	Action	Result
10/14/2015		City Council	Passed	Pass
10/13/2015	1	Committee on Finance	Recommended to Pass	
10/13/2015	1	Committee on Finance	Direct Introduction	

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/Medecins Sans Frontieres October 18, 2015 - December 31, 2015  
Citywide
- B. Planned Parenthood Federation of America, Inc. October 18, 2015 - December 31, 2015  
Citywide

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

Jc> U a^~\_jl^

Edward M. Burke / Alderman, 14<sup>th</sup> Ward '

**Document No.**

**REPORT OF THE COMMITTEE ON FINANCE TO THE CITY COUNCIL CITY OF CHICAGO**  
**PERMIT NO. 2015-19**  
**COMMITTEE ON FINANCE CHARITABLE SOLICITATION TAG**

## DAY REQUEST FORM AND ROUTE SHEET

**PERMIT NUMBER:** 2015-19

**GROUP NAME:** Doctors Without Borders/Medecins Sans Frontieres

**ADDRESS:** 333 7<sup>th</sup> Avenue, 2<sup>nd</sup> Floor, New York, NY 10001

**TELEPHONE NUMBER:** 212-679-6800

**CONTACT PERSON:** Jason Cone

**DATE WRITTEN REQUEST WAS RECEIVED:** September 20, 2015

**SOLICITATION DATE:** October 18, 2015- December 31, 2015

**CITY COUNCIL DATE:** October 14, 2015

**COMPLETION OF FILE DATE:**

**STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:**

**DATE PERMIT LETTER WAS SENT TO ORGANIZATION:** October 14, 2015

***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: Doctors Without Borders/Medecins Sans Frontieres (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

Thomas Kurmann, Director of Development, (212) 679-6800

Andreu Maldonado, Director of Finance, (212) 679-6800

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

October 1, 2015 - December 31, 2015 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 70 countries, and how they can help.
6. **Was your organization ever allowed to solicit funds in prior years in the City of Chicago? If so, when?**  
Yes, in 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.

APPLICANT IS 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.)

Director of Title Development

Signature

HOLD HARMLESS AGREEMENT

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.

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.

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

Without Borders/Medecins Sans Frontieres (MSF)

Name of organization

Signature of organization officer

9/03/2015

Date

Sep-09-15 05:47pm F

T-005 P 02/02 F-583

**OFFICE OF THE ATTORNEY GENERAL**  
**STAT E 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,

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

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PERMIT NO. 2015-20

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

**PERMIT NUMBER:** 2015-20

**GROUP NAME:** Planned Parenthood Federation of America, Inc.

**ADDRESS:** 59 Temple Place, Suite 402 Boston, MA 02111

**TELEPHONE NUMBER:** 617-338-7800

**CONTACT PERSON:** Cecile Richards

**DATE WRITTEN REQUEST WAS RECEIVED:** August 26, 2015

**SOLICITATION DATE:** October 18, 2015- December 31, 2015

**CITY COUNCIL DATE:** October 14, 2015

**COMPLETION OF FILE DATE:**

**STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:**

**DATE PERMIT LETTER WAS SENT TO ORGANIZATION:** October 14, 2015

**VIOLATION (S)**

**COMMITTEE LETTER SENT:**

**COMPLY RECEIVED:**

**COMMENTS:**

APPLIGATION FOR CTIY OF CHICAGO CHARITABLE SOLICITATION PERMIT

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

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Telephone Number:

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

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

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4. Approximately how many persons will be engaged in the

solicitation?

- 5= Explain the methods your organization will use to

solicit funds:

6. Was your organization ever allowed to solicit funds in prior years 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 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 Ccarmittee on Finance in reviewing this application.

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

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.)

HOLD HARMLESS AGREEMENT

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.

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.

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

Date

Copplevelt & Canter Fax: 918-472-5008

Apr 7 2016 02:62pm

T-846 P.04/04 F-963

**OFFICE OF THE ATTORNEY GENERAL**

STATE OF ILLINOIS

Lisa Madigan

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

**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 COS 01009083. It is current in the filing of its financial reports, having filed its report for the period ended June 30, 2014. Please let us know if you require further information.

Takiyah Martin Barnes, Compliance Officer  
Charitable Trusts Bureau  
100 West Randolph Street, 11th Floor

Chicago, Illinois 60601  
Telephone: (312)814-2595

## Key Issues

- Affordable Birth Control and Other Preventive Care
- Protecting Abortion Access
- Ensuring Health Care Access
- Expanding Global Reproductive Rights
- Opposing Attacks on Women's Health

**Over the course of a year Planned Parenthood health centers provide:**

- Birth control services to two million women
- Nearly 4.5 million STD tests and treatments, including HIV
- More than 1.1 million pregnancy tests-1.2 million lifesaving cancer screenings

**Each year, Planned Parenthood health centers help prevent pS^^Oil© unintentionijlii^^**

*Planned Parenthood Federation of America • 800-430-4907 • [www.plannedparenthood.org](http://www.plannedparenthood.org)  
<<http://www.plannedparenthood.org>>To reach the Planned Parenthood affiliate health center nearest you, call: 1-800-230-PLAN*

## Become a Monthly Member Today!

dependable and steady source of income to help protect reproductive rights and ensure access to quality reproductive health care for anyone who needs it. With this vital, consistent funding, we can act at a moment's notice to protect women's health and reproductive rights across the country and in your community.



I urge you to join this special group today. Being able to count on your support every month will be a great help in this increasingly challenging climate for women's health and rights. Thank you for all that you already do.

Cecile Richards President  
Planned Parenthood Federation of America

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- By providing a stable source of funds to Planned Parenthood.
- Your monthly contributions can be used efficiently and immediately to fund the important work Planned Parenthood does every day throughout the country and in your community to ensure access to reproductive health care.
- By donating automatically, you cut out the additional cost of postage and fundraising mailings, allowing us to use funding where it's needed most.

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- Hassle-free automatic giving - your monthly contribution is charged to your bank account or credit card, which means you don't have to write and send checks.
- By donating each month, you can spread your donations out over time.
- As a sustaining member, you won't need to renew your membership annually, and you'll receive less mail. You will receive an annual tax statement receipt at the beginning of each year for the prior year's giving.

For more information on the S^sftaesnBirag M\<Bmh<sv program, call 800-430-4907 or e-mail [monthly.member@ppfa.org](mailto:monthly.member@ppfa.org) <mailto:monthly.member@ppfa.org>

*Planned Parenthood Federation of America • 800-430-4907 • [www.plannedparenthood.org](http://www.plannedparenthood.org)  
<<http://www.plannedparenthood.org>>To reach the Planned Parenthood affiliate health center  
nearest you, call: 1-800-230-PLAN*

# Fighting Attacks on Women's Health

*January 2015*

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Governor Jindal denied Planned Parenthood an operating license to build a new health center in New Orleans.

Due to a court decision, women in Texas have fewer than 10 health centers to turn to for safe and legal abortions.

*Planned Parenthood Federation of America • 800-430-4907 •  
www.plannedparenthood.org <<http://www.plannedparenthood.org>>To reach the  
Planned Parenthood affiliate health center nearest you, call: 1-800-230-PLAN*

CHICAGO October 14, 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. Doctors Without Borders/Medecins Sans Frontieres October 18,2015-December 31,2015 Citywide
- B. Planned Parenthood Federation of America, Inc. October 18, 2015 - December 31, 2015 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 \_\_\_\_\_ (Cadya voce votg.  
of the members of the committee with \_\_\_\_\_  
dissenting vote(s)).

Respectfully submitted

**Document No.**

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