File #: Or2016-252, **Version:** 1

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
May 19, 2016 through September 17, 2016 Citywide

Hegewisch Girls Softball League
May 20-21,2016
Citywide

C. Planned Parenthood Federation of America
May 19, 2016 through September 17, 2016 Citywide

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

Edward M. Burke Alderman, 14th Ward

PERMIT NO. 2016-14

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

PERMIT NUMBER: 2016-14
GROUP NAMDoctors without Borders

ADDRESS: 333 7th Avenue, Floor 2, New York, NY 10001
TELEPHONE NUMBER: (212) 679-6800
CONTACT PERSON: Jason Cone, Executive Director
DATE WRITTEN REQUEST WAS RECEIVED: April 19,2016
SOLICITATION DATE: May 19, 2016 through September 17, 2016

CITY COUNCIL DATE: May 18, 2016
COMPLETION OF FILE DATE:
STATEMENT OF RECED7TS AND DISTRIBUTION RECEIVED:
DATE PERMIT LETTER WAS SENT TO ORGANIZATION: May 18, 2016

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: 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 Andreu Maldonado, Deputy Director, (212) 679-6800 Thomas Kurmann, Development Director, (212) 679-6800

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

   y\o\ Urtayr, 2016 - ~~Auguot 34~~, 2016 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 60 countries, and how they can help.

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

Yes, in 2010, 2015, and currently (since January 14, 2016 to date).

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. No tag or emblem will be distributed.

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.)

Date OiC&lt fyfc

Date T'Ur//U

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

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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.

Name of organization

Date

Sbp-08-15 05:4rpm f

T-005 P.02/02 F-583

OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS

Lisa Madigan
ftTlORNEYGEtftKAL

MEDEC&NS SANS FRONTIERES USA, INC. D/B/A DOCTORS
WITHOUT BORDERS 333 7TH AVE 2ND FL
NEW YORK, NY 10001

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 Organi2ation 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 as 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

City of Chicago

Committee on Finance City Hall ♦ Room 302

Alderman Edward M. Burke

Dear Charitable Organization:

Please find enclosed the application for a City of Chicago Charitable Solicitation Permit and a copy of the new Chapter 10-8-080 through 10-8-170 of the Municipal Code of the City of Chicago governing charitable solicitation in the City of Chicago.

We would suggest that you read the ordinance and become familiar with the requirements of the law. There are certain requirements for each charitable organization which solicits funds. For example, each person involved in the solicitation must display a tag or card as provided in the section 10-8-140. Section 10-8-150 requires each soliciting organization to file a statement of Receipts and Disbursements with the Committee on Finance. The Committee on Finance must receive the application for the permit no less than thirty (30) days before solicitation is to begin. You should also note that the Committee on Finance is responsible for resolving any conflicts when the same day is requested by two or more groups.

The application should be completed and addressed to;

Committee on Finance 121 North
LaSalle Street City Hall, Room 302
Chicago, Illinois 60602 (Attention:
Dawn Sanchez)

If you have any questions regarding the procedure for obtaining a Charitable Solicitation Permit, Please do not hesitate to call Dawn Sanchez of my staff at 312/744-8653.

.Sincerely,

Edward M. Burke Chairman
Committee on Finance

EMB/dms

End.

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PERMIT NO. 2016-13

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

PERMIT NUMBER: 2016-13
GROUP NAM Hegewisch Girls Softball League

ADDRESS: 13243 S. Avenue L, Chicago, IL 60633
TELEPHONE NUMBER: 773-419-1400
CONTACT PERSON: Denise Zavesky
DATE WRITTEN REQUEST WAS RECEIVED: April 20, 2016
SOLICITATION DATE: May 20-21, 2016

CITY COUNCIL DATE: May 18, 2016
COMPLETION OF FILE DATE:
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:
DATE PERMIT LETTER WAS SENT TO ORGANIZATION: May 18, 2016

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: /fejeou/sch 6lV)S*** ***b& I / LcQJUJL***

Address: /3^3 fl^enue L, Chl0 6^o, IL 6>0^33

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Telephone Number: "773 9"^

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

vrsJckrv* \ fred hWm"^ ^ <^bjo, IL 6.0633 , 7*3 *;

e Presidentl k f^olo/wiVo ^ tec<-c/, cJ^o, l<- kkl>33, ?33'^

roareri J>e^/« Z&rtSLf • ■ <LJajo, «-Ofc33 ,

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

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

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

(XY\<\ iY\ -frbn-r of 6om^ jbusf/7€£££S corf/i ^kiL^^rnis&w <f di'Sfr/i%f/t

6. Has your organization ever been allowed to solicit funds in prior^ears inYhe ^ ^ dc*TCt~ii &n „ City of Chicago? If so, when? /

i\eS} u>e dc> t^iiLfeoriLj. LOe h^iAe redely permit -/&r V-Ajz prjst' se^crcz/ otcu^ .

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. ,^ are <x^| C^> flofl - T^K"

prs-fif onjOf)[2LO±ie>i\ ±haA prorid^ a leoj^ for ^-A^ ^om^aniAj yrh-toploty, uJcl jCo^pouuL

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to aoi/^r cu^ e^n^.

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.)

Signatur e/Crbw j {jj/fai k OAAj Title / ypG <U ir€J^ ***Date ^1^1/ Lo***

Signature Title Datc_

Signature Title Date_

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

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NameJof organization

For Office Uso Only

Form AG990-IL Revised 3/05

ILLINOIS CHARITABLE ORGANIZATION ANNUAL REPORT

Attorney General LISA MADIGAN State of Illinois Charitable Trust Bureau, 100 West Randolph

Report for the Fiscal Period: Beginning 9/1/2014 & Ending 8/31/2015

11th Floor, Chicago, Illinois 60601 CO #

Check all items attached: fx"! Copy of IRS Return

Make Payable the Illinois Charity Bureau Fund

I I Audited Financial Statements

"to*[1] □ Copy of Form IFC

fx] $15.00 Annual Report Filing Fee

MO
DAY
YR
MO
YR

I | $100.00 Late Report Filing Fee

No

Date Organization was created:

Federal ID #_ ;

Year-end amounts

58,245

A) ASSETS

B) LIABILITIES

C) NET ASSETS

LEGAL NAME MAIL ADDRESS CITY. STATE ZIP CODE

Are contributions to the organization tax deductible? Yes

B) $

HEGEWISCH GIRLS SOFTBALL LEAGUE

C) $
58,245
IL

13243 AVENUE L

CHICAGO

60633

PERCENTAGE

9%

I. SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:

67%
24%
100%

D) PUBLIC SUPPORT. CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.)

E) GOVERNMENT GRANTS & MEMBERSHIP DUES

F) OTHER REVENUES

G) TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D. E, & F)

II. SUMMARY OF ALL EXPENDITURES DURING THE YEAR:

100%

H) OPERATING CHARITABLE PROGRAM EXPENSE

I) EDUCATION PROGRAM SERVICE EXPENSE

100%

J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I) Ji) JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J): $

K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS

100%

L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K) M) MANAGEMENT AND GENERAL EXPENSE

100%

N) FUNDRAISING EXPENSE

O) TOTAL EXPENDITURES THIS PERIOD (ADD L, M, & N)

III. SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES:

100%

(Attach Attorney General Report of Individual Fundraising Campaign- Form IFC. One for each PFR.) PROFESSIONAL FUNDRAISERS: P) TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS

Q) TOTAL FUNDRAISERS FEES AND EXPENSES

R) NET RECEIVED BY THE CHARITY (P MINUS Q=R)

PROFESSIONAL FUNDRAISING CONSULTANTS: S) TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS

IV. COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YEAR:

T) NAME. TITLE:

NAME, TITLE

NAME. TITLE:

V. CHARITABLE PROGRAM DESCRIPTION: charitable program p highestbys expended) code categories W)

DESCRIPTION:

List on back side of instructions CODE

DESCRIPTION

DESCRIPTION

36-4226946

HEGEWISCH GIRLS SOFTBALL LEAGUE

IF THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:

1. WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT? 1.

2. HAS THE ORGANIZATION OR A CURRENT DIRECTOR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF,

2. EVER BEEN CONVICTED BY ANY COURT OF ANY MISDEMEANOR INVOLVING THE MISUSE OR

2. MISAPPROPRIATION OF FUNDS OR ANY FELONY? - 2.

3. DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF

3. ITS OFFICERS, DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION IN

3. WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID ANY

3. OFFICER. DIRECTOR OR TRUSTEE RECEIVE ANYTHING OF VALUE NOT REPORTED AS COMPENSATION? 3.

4. HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR

4. TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHARES? 4.

5. IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION? 5.

6. DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC) 6.

7a. DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR
7b. IF "YES". ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS _$
ALLOCATED TO PROGRAM SERVICES $_
AND GENERAL $

LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES? - 7-

; (ii) THE AMOUNT

0_; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT

; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING _$_

8. DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED

8. PURPOSES? 8.

9. HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX

9. EXEMPTION SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY? 9.

10.

10. WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION

10. MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?

11. LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS:-

FIRST SAVNGS BANK OF HEGEWISCH 13220 BALTIMORE AVE CHICAGO IL 60633

CHECKING AND SAVINGS ACCOUNT

12. NAME AND TELEPHONE NUMBER OF CONTACT PERSON: DENISE ZAVESKY 773-646-1589

ALL ATTACHMENTS MUST ACCOMPANY THIS REPORT - SEE INSTRUCTIONS

JNDER PENALTY OF PERJURY. I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS ANNUAL REPORT AND THE ATTACHED DOCUMENTS, INCLUDING ALL THE SCHEDULES AND STATEMENTS AND THE FACTS THEREIN JTATED ARE TRUE AND COMPLETE AND FILED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE >EOPLE OF THE STATE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND "HE REGISTRANT HEREBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.

iE SURE TO INCLUDE ALL FEES DUE:
.) REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END.
.) FOR FEES DUE SEE INSTRUCTIONS.
.) REPORTS THAT ARE LATE OR

PRESIDENT or TRUSTEE (print name) SIGNATURE DATE

TREASURER or TRUSTEE (PRINT NAME) SIGNATURE DATE

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INCOMPLETE ARE SUBJECTTO A,~ - -. TERRI JENDRA

3/27/2016

;-STOrjr/OO'PENALT^flTj^vilSTT" PREPARER (PRINT NAME) SIRNATURF r»ATP

PERMIT NO. 2016-15

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

PERMIT NUMBER: 2016-15
GROUP NAM Planned Parenthood Federation of America

ADDRESS: 123 William Street, New York, NY 10038
TELEPHONE NUMBER: (212)541-7800
CONTACT PERSON: Cecile Richards, President
DATE WRITTEN REQUEST WAS RECEIVED: **April 19, 2016**
SOLICITATION DATE: May 19, 2016 through September 17, 2016

CITY COUNCIL DATE: May 18,2016
COMPLETION OF FILE DATE:
STATEMENT OF RECEIPTS AND DISTRIBUTION RECEIVED:
DATE PERMIT LETTER WAS SENT TO ORGANIZATION: **May 18, 2016**

VIOLATION (S)
COMMITTEE LETTER SENT:
COMPLY RECEIVED:

COMMENTS:

APPLICATION FOR CTFY OF CHICAGO CHARITABLE SOIJCTIATION

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

Name of organization: PlAaJa}£&> &*E.*yvHo©t> FevefiAno^ of fiWvucA

Acliress: 123 LOtU-iAvw Wst /J^ 'rW, ajV 10038:

Telephone Number: 2-11- I - ^-S'OO Use the space below to list names, current positions, residence

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addresses and telephone numbers of the officers in the organization: *ziz -$^{c}5^{<}$-\i-*

Cecite RvtrtA^S, V^e3iT>e*J-r 12-3 uiiu_iA*v\ 5nr_<=.£.T. ^eto Vor.vl, /OH 1003$; T-^co "Jeth^o yv\\<-<-«*-i
Chi^t DeveLoPrviEAjT OFFIce*., 12-3 0»u-v*wv £ra.$_{G}$er yotLa Yu^h

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

low many

Approximately how many persons will be engaged in the solicitation? "DETXoe&o CP ttNi-
D "30 •

Explain the methods your organization will use to solicit funds:

fWMfcO <W^thood feaefc^o $_{oF}$ $_{M(}$^$_{D}$ Grassroots
CAr^PAievvJ^, IaJC. TO Cft/vWAS'S I/O C.»tm or Ct-HcAcio

Was your organization ever allowed to solicit funds in prior years in the City of Chicago? if so, when?

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

_o^ganization in its solicitation.

Please include any~6ther relevant informaT3an~which would assist the Committee on Finance in reviewing this application.

AEPIJCKrrCNS MJST BE RECEIVED BY THE CCMttPTTEE ON FINANCE NO LATER THAN 30 DAYS PRIOR TO THE COMMENCEMENT OF THE SOTJCCTTATTON.

-Title CJOO

Signature

I/WE, OFFICER(S) OF THE ABOVE NAMED ORGANIZATION, CERTIFY THAT THE INFGRM70TON 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

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fete7//y//f

Date

HOLD HARMLESS AGREEMENT

The undersigned officer on behalf of the subject organization agrees to defend, indemnity, 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 tue 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.

PuflA^oo Pft^gAjrn-iooO Revertatio^ oF fts/wssu Name of organization

Signature of organization officer

Date

llay-13-IS 10:05ara Froi-

OFFICE OF THE ATTORNEY GENERAL
STATE OF ILLINOIS
Lisa Madigan
ATTOfWEr GENERAL

PLANNED PARENTHOOD FEDERATION OF AMERICA,
INC.
123 WILLIAM STREET, 10TH FLCOR NEW YORK,
NY 10038

RE: RE: Status of PLANNED P Al ENTHOOD FEDERATION OF AMERICA, INC. under the

Illinois Charitable Laws CO# 01009083

Dear Registrant-.

This letter is pursuant to your equest that the Attorney General confirm the slants of PLANNED PARENTHOOD FEDERATION OF AMERICA, INC. underlie Charitable Organization Laws.

This organization is currently egistered with the Attorney General's Charitable Trust and Solicitations Bureau as CO* 01009053. Ii is current in the filing of its financial reports, having filed its report for the period ended June 30,2015. Please lei us know if you require further information.

Tikiyah Martin Bames.Compliance Officer
Charitable Trusts Bureau
h JO West Randolph Street, 11 th Floor
Chicago, Illinois 60601
T:lephone: (312)814-2595

CHICAGO May 18. 2016

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.

Doctors without Borders
May 19, 2016 through September 17, 2016
Citywide

B. Hegewisch Girls Softball League
May 20-21, 2016 Citywide

C. Planned Parenthood Federation of America
May 19, 2016 through September 17, 2016 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 C^viva vocg^ vote of the members of the committee with dissenting vote(s)).

Respectfully/Submitted

Chairman

Document No.

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