



## TOGETHER HIGHLAND PARK UNIDOS

July 4<sup>th</sup> Highland Park Shooting Response Fund

### CLAIM FORM FOR NONPROFIT ORGANIZATIONS

At 10:14 a.m. on July 4, 2022, a shooter opened fire at the Highland Park 4<sup>th</sup> of July Parade and struck numerous individuals who were at the parade, resulting in deaths and injuries. Immediately thereafter, the Highland Park Community Foundation, in cooperation and with the support of the City of Highland Park, created the July 4<sup>th</sup> Highland Park Shooting Response Fund (the "Fund") to provide a charitable vehicle to assist victims of the tragic event; to support nonprofit organizations serving the needs of impacted members of Highland Park, Highwood, and other local communities; and to lessen the burdens on governmental agencies caused by the Highland Park 4<sup>th</sup> of July Parade shooting.

We recognize many agencies are immediately serving the mental health, legal, and other needs of victims of the Highland Park 4<sup>th</sup> of July Parade shooting, and as a result, these agencies constitute a category of beneficiaries of the Fund. Funding for organizations will be based on the increase in and type of client services these organizations are providing to victims and the community as a result of the shooting and whether there is an immediate need for funding. Organizations should submit claims for funding expenses not reimbursable by any state or federal government.

**Agency Name:** \_\_\_\_\_

Our nonprofit agency has been providing assistance to victims of the Highland Park 4<sup>th</sup> of July Parade shooting and community members, resulting in an increase for demand for our agency's services. The need for funding is immediate.

Yes  No

#### Organization Information:

Contact Name: \_\_\_\_\_

Street Address 1: \_\_\_\_\_

Street Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Website: \_\_\_\_\_

Federal ID#: \_\_\_\_\_

Date of Incorporation: \_\_\_\_\_

Organization chief staff officer (name/title): \_\_\_\_\_

Organization's total operating budget for past fiscal year: \_\_\_\_\_

Organization's total operating budget for current fiscal year: \_\_\_\_\_

Organization's total number of staff members: \_\_\_\_\_

Paid full time: \_\_\_\_\_ Paid part time: \_\_\_\_\_ Volunteers: \_\_\_\_\_ Other: \_\_\_\_\_

**Mission and Impact**

Organization's Mission:

**Population Served**

Please detail the increase in demand for your agency's services related to serving victims of the mass shooting and community members as a result of the Highland Park 4<sup>th</sup> of July Parade shooting and any anticipated long-term impact for continued services:

Please indicate the number of people your agency anticipates serving with this request: \_\_\_\_\_

Please indicate the amount your agency is requesting with this Claim Form: \$ \_\_\_\_\_

Please itemize increased cost related to these services:

Personnel: \_\_\_\_\_

Materials: \_\_\_\_\_

Other (please specify): \_\_\_\_\_

Total: \_\_\_\_\_

Please indicate that you have attached the following documents with your Claim Form:

- 501(c)(3) Tax ID Letter
- Form W-9
- Most recent Form 990

*Once complete, please submit this form and the required documents via email **by 5:00 p.m. Central Time on September 14, 2022**, to [july4fund@hpcfll.org](mailto:july4fund@hpcfll.org).*

