

Request Information


Type of Support Requested *(Check all that apply)*

☐ Exhibitor ☐ Giveaways ☐ Health Presentation ☒ Health Screening ☐ Monetary Donation ☐ Advertising ☐ Program ☐ Sponsorship ☐ Other

Enter Other Type of Support

General Contact Information

Request Date

 4/11/2022

Event Name(If applicable)

22nd Annual Central Illinois Senior Celebration

Name of Organization

Senior Services of Central Illinois

Contact Person

Kathy Hampsey

Phone (Work)

217-814-4874

Phone (Mobile)

###-###-####

Email Address

kathryn.hampsey@hshs.org

Address

800 E Carpenter St

City

Springfield

State

IL

Zip

62769

Organization Information

Is your organization a tax-exempt organization?

☐ Yes ☐ No

Organization's Website

Organization's Mission

I'm just on the planning board, I don't know the Senior Services mission statement or tax status

Organization's Counties Served

Sangamon|Other:Not sure all the counties the Senior Services of Central IL serves

Health Screening Information

Health Screening Requested

vascular services to provide cholesterol screening, home services health screening, orthopedic services for bone density screenings.

Please attach supporting documents

No file chosen

Community Support Information

Describe Request (such as target audience, number of people to be served, how this support will be used, etc.)

2,000 senior citizens expected. Requesting health screeners from Memorial who have participated in this event in the past including: vascular services to provide cholesterol screening, home services health screening, orthopedic services for bone density screenings.

Does your initiative support one of Memorial's identified community health needs? (*economic disparities, mental health, access to health, obesity, substance use, lung health, cancers, or equity/diversity/inclusion*)

☐ Yes ☐ No

Please select which of Memorial's identified community health needs are supported (*Check all that apply*)

- ☐ Economic Disparities
- ☐ Access to Health
- ☐ Substance Use
- ☒ Cancers
- ☐ Mental health
- ☒ Obesity
- ☒ Lung Health
- ☐ Equity/Diversity/Inclusion

Please describe how the selected community health need is supported by your organization or at your event

We have health screeners signed up for the event already addressing these areas including Memorial Cancer center, stroke center, and weight loss and diabetes services

Memorial Health Information

Is anyone at Memorial Health on your organization's board or involved with this initiative?

☐ Yes ☐ No ☐ Unknown

Who is on your board, and what is their role?

Jay Boulanger

Will Memorial Health receive any publicity or recognition for this donation?

☐ Yes ☐ No ☐ Unknown

In what form?

social media and signs at event

Has Memorial Health provided support for your organization in the past?

☐ Yes ☐ No ☐ Unknown

In what way?

in the same way, with the same health screeners requested

If a Memorial Health sponsorship/contribution is provided, the use of those dollars is to be restricted to the purpose as stated in this online Sponsorship and Funding Request application. Do you accept this restriction of funding?

☐ I accept ☐ I do not accept

Request Receipt - For Administrative Purposes Only

Review Date



Reviewed By

Referred Date



Referred To

Request Status - For Administrative Purposes Only

Request Status

In Review

Request Status Date




Amount Given

0

Cost Center

Notification to Applicant Date



Notification Letter

Choose File

No file chosen

Comments About Request

Community Health Accepted

☐ Yes ☐ No ☐ NA

Marketing Accepted

☐ Yes ☐ No ☐ NA

EDI Accepted

☐ Yes ☐ No ☐ NA

SL Accepted

☐ Yes ☐ No ☐ NA

Approved Request Status - For Administrative Purposes Only

Submission of Disbursement Date



Disbursement Order

Choose File

No file chosen

Qualifies for Community Benefit

☐ Yes ☐ No

Bypassed Process

☐ Yes ☐ No ☐ NA

Percentage (60 or above)

0

Were any Tickets, Marketing, etc., received?

☐ Yes ☐ No

If so, what was the value? (Deduct from total of Community Benefit)

0.00

Accounting Notified



Notes

Cancel 

Print 

Save 