



Osteopathic Medical Relief Organization

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September 1, 2010

Elizabeth Harano
Executive Director
142 East Ontario, 4th Floor
Chicago, IL 60611

Dear Ms. Harano:

In recent months, severe storms have battered areas of the country and flooding has disrupted many lives and businesses. On behalf of the Osteopathic Family Relief Fund (OFRF), I would like to remind you that the OFRF is available to help physicians whose practices have been significantly affected by these and other natural disasters.

The OFRF provides grants from \$2,500 to \$10,000 to help physicians rebuild their offices and practices after suffering through such natural disasters as hurricanes, severe storms, and flooding. Physicians who have been affected in counties recognized by the Federal Emergency Management Agency (FEMA) as disaster areas are eligible to apply for an OFRF grant.

Enclosed are a grant application and a list of counties in your state most recently affected by a disaster. We hope that you will share this information and encourage physicians whose offices have suffered adversely in one of these counties to apply for funding to help rebuild their practices.

If you have questions or need additional assistance, please contact Rickie Jacobs, CAE, OFRF Secretary, at rjacobs@osteopathic.org or 800/621-1773 x 8164 (fax: 312/202-8464).

Sincerely,

John E. Bodell, DO

JEB:rmj/Attachments

142 East Ontario Street
4th Floor
Chicago, Illinois 60611
Telephone: 312/202-8164
Fax: 312/202-8464
Email: rjacobs@osteopathic.org

OFRF Disaster Note

September 2, 2010

Disaster: Severe Storms and Flooding

Dates: July 22 to August 7, 2010

Declared: August 19, 2010

Location: Illinois

Counties:

1. Carroll
2. Cook
3. DuPage
4. Jo Daviess
5. Ogle
6. Stephenson
7. Winnebago

2. How has this affected your ability to practice medicine?

3. What do you anticipate your financial losses to be after settlement of all insurance claims?

4. Have you or do you foresee applying for disaster relief assistance in the form of loans or grants from any state or federal agencies? If yes, please provide the name of the agency and the dollar value of relief applied for or received.

5. Please submit any additional information you feel is pertinent to this application.

Photographs are welcomed. Please provide a caption or description of each photo. Photos may also be emailed to Rickie Jacobs, Secretary, at rjacobs@osteopathic.org.

Certification by Grant Applicant

I certify that I have suffered the damage to my medical practice or residence as described above. I understand that I may be requested to provide additional information in order for my application to be considered. I also certify that the other information contained in this application is true and complete. I understand that a material misrepresentation or omission of any information is grounds for denial of a grant. I understand that the granting of assistance is neither a right nor an entitlement, and that the Osteopathic Family Relief Plan shall have sole discretion in determining whether I qualify for or receive a grant.

I agree to the terms above. _____
Signature Date

Forms must be completed in their entirety to be considered. Return form to:

Osteopathic Family Relief Fund
 c/o Rickie Jacobs, Secretary
 142 East Ontario Street, 4th Floor
 Chicago, Illinois 60611

Telephone: 312/202-8164 or 800-621-1773 x 8164
 Email: rjacobs@osteopathic.org Fax: 312/202-8464