14' ORL <u>2016</u> <u>APPLICATION FOR LICENSE</u> <u>RAFFLE TICKETS</u> (This is a <u>two-sided</u> application PLEASE NOTE: Any misrepresentation the License as granted. <u>Applications m</u> For information or questions, please cal	or falsification of the information sough	or to the raffle date requested.				
NAMES OF UNDERSIGNED ORGANIZATION OFFICERS (PERSONS SUBMITTING APPLICATION)						
DATE OF APPLICATION:	1/29/16					
PRESIDENT OR PRESIDING OFFICER: MICHMEZ Harder						
SECRETARY:	Deputa Barrie					
ADDRESS OF APPLICANT:	10917 Anthony De.					
	Orland PARK, K 60467					
ORGANIZATION REQUESTING LICENSE:	Ocland PARK Lotory Chill					
ADDRESS OF ORGANIZATION:	PO Box 276 Ocumed PARK 16 60462					
NAME AND ADDRESS OF RAFFLE MANAGER:	MICHMEL HARDER 10917 Antring De, Dalard PHONE 708-979-0623	PACK, 12-60-46-7				
ADDRESS OF PLACE(S) OR AREA(S)						
Silver LAKE Cauter Club - 19700 82nd Ave, Ocland PARK, 11. 60462						
PURPOSE OF RAFFLE: To sponsor Community Scholarships						
TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUEI $3/8$ <u>$5/26$</u>						
MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED:						
PRICE OF CHANCES	LARGEST PRIZE VALUE: \$24,900 SINGLE PRI	ZE; 20,000				
TIME. DATE AND LOCATION WHERE W	INNING RAFFLE CHANCE WILL BE DET	ERMINED:				

8:00 PM	5/26/16	Silver Lake - 1470082m As, Olerand Park
Time	Date 4	Location of Rafile Drawing (Auuress, City, State) 1/ 60/62_

CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

Religious	Charitable	Labor	Fraternal <u></u>	Business				
Educational	Veterans' Org	anization	*Non-Profit Fund Ra	nising				
*(check this box if a hardship, as a resul	organized solely to raise t of illness, disability, ac	funds for an individ cident or disaster)	ual or group of individuals s	suffering extreme financial				
LENGTH OF TIME ORGANIZATION HAS BEEN IN EXISTENCE: 44 Yorks								
PLACE AND DATE OF INCORPORATION OF ORGANIZATION: 1472								
IF NOT A CORP	PORATION, STATE	WHEN AND HO	W ORGANIZED:					
NUMBER OF M	EMBERS OF ORGA	NIZATION THA	AT RESIDE IN VILLAG	ie: _25				

The undersigned, under oath attest that we have read and understand Ordinance #3480 entitled "An ordinance of the Village of Orland Park establishing a system for the licensing of organizations to operate raffles" and we further attest to the non-profit character of the prospective license organization.

Further the undersigned attest that they comply with all provisions of Ordinance #3480 and understand that violations of this ordinance are subject to fines of not less than one-hundred dollars (\$100.00) and not more than seven-hundred-and-fifty dollars (\$750.00) per violation.

President or Presiding Officer

Signature:

ATTEST:

Secretary:

h A be or Print Name

Signature:

SUBSCRIBED AND SWORN TO

before me this day of Uanuary. **OFFICIAL SEAL** Sarah Adlfinger Notary Public - State of Illinois (Notary Public) My Commission Expires September 04, 2019 **Commission Expires:**