

VILLAGE OF ORLAND PARK
14700 RAVINIA AVENUE
ORLAND PARK, IL 60462

2014
APPLICATION FOR LICENSE TO SELL
RAFFLE TICKETS
(This is a two-sided application)

(To be completed by Village staff)

Date Approved: _____

Date Denied: _____

Approval: _____
Village Clerk

Expires: _____

APPROVED APPLICATION
SERVES AS LICENSE

PLEASE NOTE: Any misrepresentation or falsification of the information sought below may result in revocation of the License as granted. **Applications must be submitted at least 30 days prior to the raffle date requested.** For information or questions, please call (708) 403-6150.

~Each license is valid for not more than 1 raffle per week during any 1 year period.~

NAMES OF UNDERSIGNED ORGANIZATION OFFICERS
(PERSONS SUBMITTING APPLICATION)

DATE OF APPLICATION: 1/15/14

PRESIDENT OR PRESIDING OFFICER: Paul Grimes, Village Manager

SECRETARY: _____

ADDRESS OF APPLICANT: _____

ORGANIZATION REQUESTING LICENSE: Village of Orland Park

ADDRESS OF ORGANIZATION: 14700 S. Ravinia Ave.
Orland Park, IL 60462

NAME AND ADDRESS OF RAFFLE MANAGER: _____

PHONE 708-364-0682

ADDRESS OF PLACE(S) OR AREA(S) WHERE CHANCES ARE TO BE SOLD OR ISSUED:
Orland Chateau

PURPOSE OF RAFFLE: Chefs' Auction to Benefit ACS Breast Cancer Research

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: 6-10 pm

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: 1000

PRICE OF CHANCES: 3/\$5 TOTAL PRIZE VALUE: various LARGEST SINGLE PRIZE: \$500.00

TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED:
9 pm 2/20/14 Orland Chateau, Orland Park **OVER**
Time Date Location of Raffle Drawing (Address, City, State)

CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

Religious _____ Charitable X Labor _____ Fraternal _____ Business _____

Educational _____ Veterans' Organization _____ *Non-Profit Fund Raising _____

*(check this box if organized solely to raise funds for an individual or group of individuals suffering extreme financial hardship, as a result of illness, disability, accident or disaster)

LENGTH OF TIME ORGANIZATION HAS BEEN IN EXISTENCE: _____

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: _____

IF NOT A CORPORATION, STATE WHEN AND HOW ORGANIZED: _____

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: _____

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.

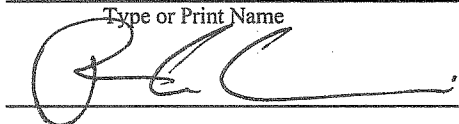
Further the undersigned attest that they comply with all provisions of Ordinance #3480 and understand that violations of this ordinance are subject to fines of not less than one-hundred dollars (\$100.00) and not more than seven-hundred-and-fifty dollars (\$750.00) per violation.

President or
Presiding Officer

Paul G. Grimes, Village Manager

Type or Print Name

Signature:



ATTEST:

Secretary:

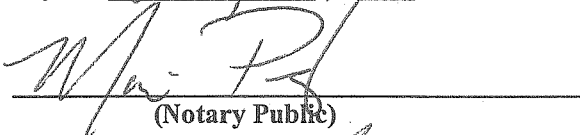
Type or Print Name

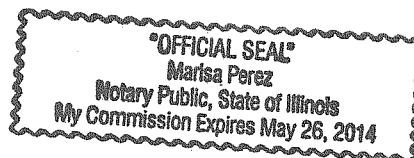
Signature:

SUBSCRIBED AND SWORN TO

before me this 15th

day of January, 2014.


(Notary Public)



Commission Expires: May 26, 2014