

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

(To be completed by Village staff)

Date Approved: _____
Date Denied: _____
Approval: _____
Village Clerk
Expires: _____

APPROVED APPLICATION
SERVES AS LICENSE

2017
APPLICATION FOR LICENSE TO SELL
RAFFLE TICKETS
(This is a two-sided application)

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: 3/5/17

PRESIDENT OR PRESIDING OFFICER: Lori Carroll

SECRETARY: Lori Carroll

ADDRESS OF APPLICANT: 9131 Walnut Lane
Tinley Park IL 60487

ORGANIZATION REQUESTING LICENSE: MS Walk South Suburbs

ADDRESS OF ORGANIZATION: 9131 Walnut Lane
Tinley Park IL 60487

NAME AND ADDRESS OF RAFFLE MANAGER: Lori Carroll + Mike Carroll
9131 Walnut Lane Tinley Park IL 60487

PHONE 708-334-9190

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

Centennial Park - Orland Park

PURPOSE OF RAFFLE: Fundraising to support programs, services + research for the MS Society

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: 7:30 AM to 1 PM 5/7/17

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: 800 - 1,000

PRICE OF CHANCES: 3/45 ~~or \$12~~ TOTAL PRIZE VALUE: \$5,000 LARGEST SINGLE PRIZE: \$300

TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED:

1 PM 5/7/17
Time Date Location of Raffle Drawing (Address, City, State)



CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

Religious _____ Charitable 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: Est 1946 Chapter 1952

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: 20,000

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

Lori Carroll
Type or Print Name

Signature:

Lori Carroll

ATTEST:

Secretary:

Type or Print Name

Signature:

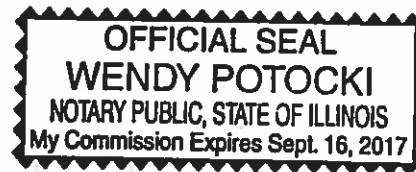
Lori Carroll

SUBSCRIBED AND SWORN TO

before me this 10

day of March, 2010.

Wendy Potocki
(Notary Public)



Commission Expires: 9/16/2014