

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

2015
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: February 11, 2015

PRESIDENT OR PRESIDING OFFICER: Don Vacha

SECRETARY: Janet Donne

ADDRESS OF APPLICANT: CSHS Music Booster Club
P.O. Box 1066
Orland Park, IL 60462

ORGANIZATION REQUESTING LICENSE: Carl Sandburg High School Music Boosters Club

ADDRESS OF ORGANIZATION: P.O. Box 1066
Orland Park, IL 60462

NAME AND ADDRESS OF RAFFLE MANAGER: Elise Wehmeier

14410 RAVEYS LN OP 60462

PHONE (708) 671-4153 or 708-207-8085

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

Carl Sandburg High School, 13300 South LaGrange Road, Orland Park, IL 60462

PURPOSE OF RAFFLE: Fund raising in connection with Spring Craft Show

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: Sat. 3/14 9 am - 4 pm
Sun 3/15 10 am - 3 pm

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: 500

PRICE OF CHANCES: \$1 each or 12 for \$10 TOTAL PRIZE VALUE: NOT KNOWN LARGEST SINGLE PRIZE: \$200

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

9-4 MARCH 14, 2015
10-3 MARCH 15, 2015

13300 South LaGrange Road, Orland Park, IL 60462

Time

Date

Location of Raffle Drawing (Address, City, State)

OVER

CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

Religious _____ Charitable _____ Labor _____ Fraternal _____ Business _____

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

*(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: 26+ years

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: _____

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

Booster Club @ Carl Sandburg HS

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: 600+

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 Don Vacha
Type or Print Name

Signature: Don Vacha

ATTEST:

Secretary: Janet Donne
Type or Print Name

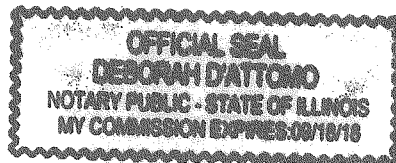
Signature: Janet Donne

SUBSCRIBED AND SWORN TO

before me this 11th

day of February, 2015.

Deborah D'Attono
(Notary Public)



Commission Expires: 9/18/2018