

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

2019
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: 10-3-2019

PRESIDENT OR PRESIDING OFFICER: DALE CARVER

SECRETARY: DARRYL WERTHEIM

ADDRESS OF APPLICANT: 14700 RAVINIA
ORLAND PARK, IL 60462

ORGANIZATION REQUESTING LICENSE: ORLAND PARK VETERANS COMMISSION

ADDRESS OF ORGANIZATION: 14700 RAVINIA
ORLAND PARK, IL 60462

NAME AND ADDRESS OF RAFFLE MANAGER: DARRYL WERTHEIM
13244 DAN MURPHY DR. O.P. IL 60462
PHONE 708-781-9696

ADDRESS OF PLACE(S) OR AREA(S) WHERE CHANCES ARE TO BE SOLD OR ISSUED: MACKAY'S PUB. 9400 W 143RD ST O.P. IL 60462

PURPOSE OF RAFFLE: Fund Raiser For the Disabled Patriot Fund
of ORLAND PARK VETERANS COMMISSION 50/50 split

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: Every Wednesday

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

PRICE OF CHANCES: \$1 Each TOTAL PRIZE VALUE: ongoing LARGEST SINGLE PRIZE: undetermined

TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED:
8 pm Every Wednesday Mackay's Pub. 9400 W 143rd St O.P. IL 60462
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: 20 YEARS

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: Village of Orland Park 1991

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

Village of Orland Park Commission

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: 9

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 Dale Carver
Type or Print Name

Signature: X Dale A Carver

ATTEST:

Secretary: Darryl Wertheim
Type or Print Name

Signature: Darryl Wertheim

SUBSCRIBED AND SWORN TO

before me this _____

day of _____, 20__.

(Notary Public)

Commission Expires: _____