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

2014 APPLICATION FOR LICENSE TO SELL RAFFLE TICKETS

(This is a <u>two-sided</u> application)

| | (To be completed by Village staff) | | | | | | |
|---|---|--|--|--|--|--|--|
| | Date Approved: | | | | | | |
| PERSONAL PROPERTY OF THE PERSONAL PROPERTY OF | Date Denied: | | | | | | |
| erekonoentrianienkondze | Approval:Village Clerk | | | | | | |
| disconnection of the last | 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.

| | n or questions, please call hicense is valid for not m | (708) 403-6130. nore than 1 raffle per week | during any 1 year perio | od.~ | | | |
|-----------------------------------|--|---|-------------------------|------|--|--|--|
| | | DERSIGNED ORGANIZATION NS SUBMITTING APPLICATION | | | | | |
| DATE OF APPLICATION: 1/15/14 | | | | | | | |
| | OR PRESIDING OFFICER | Paul Grimes, Village Manager | | | | | |
| SECRETAR | Y : | *************************************** | | | | | |
| ADDRESS O | F APPLICANT: | | | | | | |
| ORGANIZA' REQUESTIN | TION NG LICENSE: | Village of Orland P | Park | | | | |
| | | 14700 S. Ravinia | 14700 S. Ravinia Ave. | | | | |
| ADDRESS O | F ORGANIZATION: | Orland Park, IL 60462 | | | | | |
| NAME AND OF RAFFLE MANAGER: | | | | | | | |
| | | PHONE 708-364-0682 | | | | | |
| | of PLACE(S) OR AREA(S) Viland Chateau | VHERE CHANCES ARE TO | BE SOLD OR ISSUED: | | | | |
| PURPOSE O | FRAFFLE: Chefs' Auct | ion to Benefit ACS Brea | st Cancer Research | | | | |
| TIME PERIO | D WHICH RAFFLE CHANCES | S WILL BE SOLD OR ISSUED: | 6-10 pm | | | | |
| MAXIMUM N | IUMBER OF RAFFLE CHANC | ES TO BE SOLD OR ISSUED: | 1000 | | | | |
| PRICE OF CE | HANCES: 3/\$5 TOTAL | PRIZE VALUE: <u>various</u> SI | LARGEST \$500.00 | | | | |
| TIME, DATE | AND LOCATION WHERE WI | NNING RAFFLE CHANCE WII | LL BE DETERMINED: | - | | | |
| 9 pm | 2/20/14 Or | orland Chateau, Orland Park | | | | | |
| 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' Organiz | zation | *Non-Profit Fun | d Raising |
| | inized solely to raise fund illness, disability, accider | | idual or group of individ | uals suffering extreme financial |
| LENGTH OF TIME | ORGANIZATION H | ias been i | N EXISTENCE: | |
| PLACE AND DATE | OF INCORPORATI | ON OF OR | GANIZATION: | |
| IF NOT A CORPOI | RATION, STATE WH | IEN AND H | OW ORGANIZED: | |
| NUMBER OF MEM | IBERS OF ORGANIZ | ZATION TH | AT RESIDE IN VIL | LAGE: |
| | | | | |
| ordinance of the Vi | llage of Orland Park | establishing | g a system for the lice | dinance #3480 entitled "An ensing of organizations to rospective license organization. |
| that violations of th | | ect to fines | of not less than one- | dinance #3480 and understand hundred dollars (\$100.00) and |
| President or Presiding Officer | Paul G. Grin | nes, Villag | e Manager | |
| Signature: | JE | | | |
| ATTEST: | | , | | |
| Secretary: | Type or P | rint Name | | |
| Signature: | | | | |
| SUBSCRIBED A | ND SWORN TO | | | |
| before me this | 15th | | West West of the second | |
| day of Januar (Notar | y Public) | neonjucia (Alingua) nuominina | & Motory D. Li | CIAL SEAL* isa Perez ic, State of Illinois Expires May 26, 2014 |
| Commission Expir | res: May 26 | ,2014 | CONTRACTOR | |