

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: 09/27/2019

PRESIDENT OR PRESIDING OFFICER: Phillip Bell

SECRETARY: Brent Woods

ADDRESS OF APPLICANT: 14531 Ridge Ave
Orland Park, IL 60462

ORGANIZATION REQUESTING LICENSE: Disabled Patriot Fund

ADDRESS OF ORGANIZATION: 10767 West 163rd Place
Orland Park, IL 60467

NAME AND ADDRESS OF RAFFLE MANAGER: Phillip Bell
14531 Ridge Ave., Orland Park, IL 60462
PHONE 708-860-2355

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

PURPOSE OF RAFFLE: Support Disabled Veterans

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: 1 year

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: 100,000

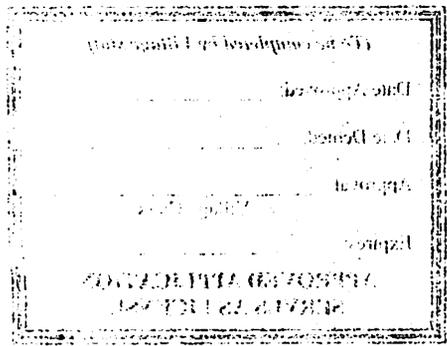
PRICE OF CHANCES: \$1 TOTAL PRIZE VALUE: \$100,000 LARGEST SINGLE PRIZE: \$50,000

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

8PM Wednesday Nights (Progreasive weekly raffle) Mackeys Pub, 9400 W 143rd St, Orland Park, IL 60462

Time Date Location of Raffle Drawing (Address, City, State)

OVER



VILLAGE OF ORCHARD PARK
14521 RIDGE AVENUE
ORCHARD PARK, IL 60462

2018
APPLICATION FOR LICENSE TO SELL
PARKING TICKETS
(This is a regulated occupation)

PLEASE NOTE: The application for a license to sell parking tickets is subject to a public hearing. The hearing will be held on the date and time specified in the notice of public hearing. Applications must be submitted at least 30 days prior to the public hearing. The applicant must be a resident of the Village of Orchard Park, Illinois. The applicant must be at least 18 years of age. The applicant must not have been convicted of a crime involving dishonesty or fraud within the last 5 years.

NAME OF APPLICANT OR ORGANIZATION OF OFFICER
(PLEASE PRINT FULL NAME)

000715019

DATE OF APPLICATION

Phillip Bell

OFFICER OR MEMBER OF OFFICE

Brent Woods

SECRETARY

14521 Ridge Ave

ADDRESS OF APPLICANT

Orchard Park, IL 60462

ORGANIZATION
REGISTRATION NUMBER

Disabled Patriot Fund

ADDRESS OF ORGANIZATION

10727 West 143rd Place

Orchard Park, IL 60462

NAME AND ADDRESS
OF BANK
BANK NUMBER

Phillip Bell

14521 Ridge Ave, Orchard Park, IL 60462

PHONE 708-800-5358

ADDRESS OF ALL OTHER WHEREAS ARE TO BE SOLD OR RECEIVED

NUMBER OF PARKING TICKETS TO BE SOLD

Support Disabled Veterans

THE PERIOD WITHIN WHICH THE TICKETS SHALL BE SOLD OR RECEIVED

1 year

AMOUNT OF THE OTHER FEE TO BE PAID OR RECEIVED

100.000

NET OF CHARGES \$1 TOTAL GROSS \$100.000 SINGLE TICKET \$250.000

APPLICANT'S AND OFFICER'S SIGNATURE AND TITLE (PLEASE PRINT FULL NAME)

OVER

DATE: We hereby certify that the applicant has been approved for the license to sell parking tickets for the period of one year, commencing on the date of this license. The applicant must be a resident of the Village of Orchard Park, Illinois. The applicant must be at least 18 years of age. The applicant must not have been convicted of a crime involving dishonesty or fraud within the last 5 years.

CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

Religious _____ Charitable X Labor _____ Fraternal _____ Business _____

Educational _____ Veterans' Organization X *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: 14 years

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: Illinois, 2005

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

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: 5

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 Phillip L. Bell
Type or Print Name

Signature: [Handwritten Signature]

ATTEST:

Secretary: Brent Woods
Type or Print Name

Signature: [Handwritten Signature]

SUBSCRIBED AND SWORN TO

before me this 27

day of September, 2019.

[Handwritten Signature]
(Notary Public)



Commission Expires: 4/23/21

Notary Public - State of Illinois
My Commission Expires: 03/31/2021

Notary Public - State of Illinois
My Commission Expires: 03/31/2021

Notary Public - State of Illinois
My Commission Expires: 03/31/2021

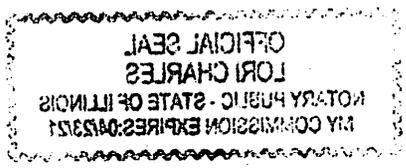
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