

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

2014  
**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: 9-24-14

PRESIDENT OR PRESIDING OFFICER: CHRISTOPHER KUSPER

SECRETARY: DAN HURLEY

ADDRESS OF APPLICANT: 13971 Springgreen Ln  
Orland Park

ORGANIZATION REQUESTING LICENSE: Orland Youth Assoc. for Boys

ADDRESS OF ORGANIZATION: P.O. Box 420 10649C 163<sup>rd</sup> Pl.  
Orland Park

NAME AND ADDRESS OF RAFFLE MANAGER: Chris Kusper

same  
PHONE 108-307-4066

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

to families in Orland Park  
PURPOSE OF RAFFLE: fundraiser for Cooperstown trip

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: Oct 1, 2014 - Dec 1, 2014

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: 250

PRICE OF CHANCES: \$25 TOTAL PRIZE VALUE: \$1000 LARGEST SINGLE PRIZE: \$1000

TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED:  
12/6/14 10649C 163<sup>rd</sup> Pl. OP. OVER

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 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: 50 years

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: 2000 approx.

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

CHRISTOPHER KUSPER  
Type or Print Name

Signature:

[Signature]

ATTEST:

Secretary:

DAN HURLEY  
Type or Print Name

Signature:

[Signature]

SUBSCRIBED AND SWORN TO

before me this 24th  
day of September, 2014.



Diane Niehaus  
(Notary Public)

Commission Expires: 2/27/16