

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

2018
**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: 3/5/2018

PRESIDENT OR PRESIDING OFFICER: Patrick Zomparelli

SECRETARY: Debra Baker

ADDRESS OF APPLICANT: 9200 W. 143rd St
Orland Park IL 60462

ORGANIZATION REQUESTING LICENSE: ORLAND PARK ROTARY

ADDRESS OF ORGANIZATION: PO Box 276
Orland Park IL 60462

NAME AND ADDRESS OF RAFFLE MANAGER: Debra Baker
13662 Thicket Ct Homer Glen IL 60491
PHONE 708 362 1058

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

PURPOSE OF RAFFLE: Scholarships and Local Community Service Projects

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: 3/20/18 - 5/24/2018

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: 600

PRICE OF CHANCES: \$100 TOTAL PRIZE VALUE: \$24900 LARGEST SINGLE PRIZE: \$20,000

TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED:
8pm May 24 2018 Silver Lake Country Club **OVER**
14700 82nd Ave Orland Park IL
Time Date Location of Raffle Drawing (Address, City, State) 60462

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: 113

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: Chicago IL

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

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: 35

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 Patrick Zompavelli
Type or Print Name

Signature: Patrick Zompavelli

ATTEST:
Secretary: Debra J. Baker
Type or Print Name

Signature: Debra J. Baker

SUBSCRIBED AND SWORN TO

before me this 5th
day of March, 2018.

Linda LaPorte
(Notary Public)



Commission Expires: 6/15/2020