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

2016 APPLICATION FOR LICENSE TO SELL RAFFLE TICKETS

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

I	(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.-

	INDERSIGNED ORGANIZATION OFFICERS SONS SUBMITTING APPLICATION)
DATE OF APPLICATION:	6-14-16
PRESIDENT OR PRESIDING OFFICE	ER: GENE MONTALBANO
SECRETARY:	
ADDRESS OF APPLICANT:	7216 W. 153Rd St. O.P. IL 60462
ORGANIZATION REQUESTING LICENSE:	ORLAND MEMORIAL POST#111 American Legion
ADDRESS OF ORGANIZATION:	15045 West Nue on P.G. Box 413
	Orland Park, IL 60462
NAME AND ADDRESS OF RAFFLE MANAGER:	Gene MONTALBANO 7216W 153rd ST. O.P. IL 60462
•	PHONE 708-268-4363
	WHERE CHANCES ARE TO BE SOLD OR ISSUED:
Taste of Orland and	at Post (15045 Westave) George Brown Vot SRV. C.
PURPOSE OF RAFFLE: Ranse	FUNDS FOR POST OPPRATIONS,
JANS JAINRIO TIMEIPERIOD WHICH RAFFEE CHANCE	ES WILL BE SOLD OR ISSUED: TWY IST TO SEPT 27, 2016 TES TO BE SOLD OR ISSUED: 6,000
	CES TO BE SOLD OR ISSUED: 6,000
# 1.60 eq or 6 fer \$5.00 PRICE OF CHANCES: TOTAL	L PRIZE VALUE: \$500,00 LARGEST \$256.00
·	VINNING RAFFLE CHANCE WILL BE DETERMINED: 145 West Ave. Orland PK, TL 60 462 Location of Raffle Drawing (Address, City, State) GBNSC.

CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

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
*(check this box if arganized solely to raise funds for an individual or group of individuals suffering automa financial
hardship, as a result of illness, disability, accident or disaster)
LENGTH OF TIME ORGANIZATION HAS BEEN IN EXISTENCE:
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: 150+About
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 GENE Montalbano Type or Print Name
Signature: Live & Moundain
ATTEST:
Secretary: TR. RICHARD BAL. BOIL Type or Print Name
Signature: Rulf Ralfon
SUBSCRIBED AND SWORN TO
before me this 15^{-47}
day of June, 2016. OFFICIAL SEAL JASON DREHER Notary Public - State of Illinois My Commission Expires Jul 10, 2018
(Notary Public) Commission Expires: 7/10/18