

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:

\$1.00

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 Zomparelli
Type or Print Name

Signature:

Patrick Zomparelli

ATTEST:

Secretary:

Debra J. Baker
Type or Print Name

Signature:

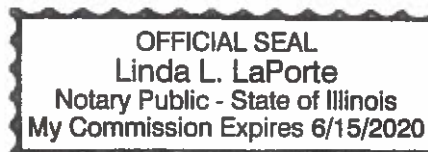
Debra J. Baker

SUBSCRIBED AND SWORN TO

before me this 5th

day of March, 2018.

Linda LaPorte
(Notary Public)



Commission Expires: 6/15/2020