

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

2017
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: 2/10/07
PRESIDENT OR PRESIDING OFFICER: DONALD J ADE
SECRETARY: JUDY SATURNUS
ADDRESS OF APPLICANT: 15435 SUNFLOWER CT. ORLAND PARK

ORGANIZATION
REQUESTING LICENSE: ORLAND PARK LAW ENFORCEMENT ASSN

ADDRESS OF ORGANIZATION: 15100 RAVINIA ORLAND PARK 60462

NAME AND ADDRESS
OF RAFFLE
MANAGER: DONALD J ADE

PHONE 708-403-9308

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

ORLAND PARK CIVIC CENTER

PURPOSE OF RAFFLE: RAISE MONIES FOR ORG

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: DATES OF MEETINGS

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

PRICE OF CHANCES: 1.00 TOTAL PRIZE VALUE: 75.00 LARGEST SINGLE PRIZE: 35.00

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

8:00 PM DATES OF MEETING CIVIC CENTER 14750 RAVINIA
Time Date Location of Raffle Drawing (Address, City, State)

OVER

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: 31 Years
PLACE AND DATE OF INCORPORATION OF ORGANIZATION: CHICAGO ILL 01/11/45
15 DEC 06

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

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: _____

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 Donald J. Abo
Type or Print Name

Signature: [Signature]

ATTEST:

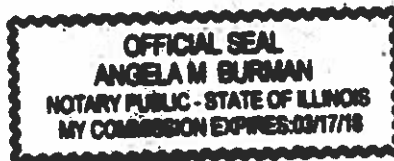
Secretary: JERRY SATERNY
Type or Print Name ILLINOIS COUNTY COOK

Signature: [Signature]
NOTARY PUBLIC Angela M. Burman
26 DECEMBER 17

SUBSCRIBED AND SWORN TO

before me this _____

day of _____, 20____.



(Notary Public)

Commission Expires: _____