

Year: 2020

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

*(To be completed by Village staff)*

Date Approved: \_\_\_\_\_  
Date Denied: \_\_\_\_\_  
Approval: \_\_\_\_\_  
Village Clerk  
Expires: \_\_\_\_\_

**APPROVED APPLICATION  
SERVES AS LICENSE**

**APPLICATION FOR LICENSE TO SELL  
RAFFLE TICKETS**  
*(This is a two-page application)*

**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: June 19, 2020  
PRESIDENT OR PRESIDING OFFICER: Terrence J. Hancock  
SECRETARY: Roberta Lester  
ADDRESS OF APPLICANT: 14551 S. Ravinia Ste 2B  
Orland Park, IL 60462  
ORGANIZATION REQUESTING LICENSE: In Search of a Cure  
ADDRESS OF ORGANIZATION: 14551 S. Ravinia Ste. 2B  
Orland Park, IL 60462  
NAME AND ADDRESS OF RAFFLE MANAGER: 14551 S. Ravinia Ste. 2B  
Orland Park, IL 60462  
PHONE 630-887-4141

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

Silver Lakes Country Club  
PURPOSE OF RAFFLE: Raise funds for charitable purposes

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: July 30, 2020

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: 500 est.

PRICE OF CHANCES: Various TOTAL PRIZE VALUE: \$20,000. SINGLE PRIZE: \$10,000. **LARGEST**

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

7 pm July 30, 2020 Silver Lakes Country Club  
Time Date Location of Raffle Drawing (Address, City, State)

**OVER**

**CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION**

Religious \_\_\_\_\_ Charitable XX 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: 12 years

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: ILLINOIS 4/16/08

IF NOT A CORPORATION, STATE WHEN AND HOW ORGANIZED: \_\_\_\_\_

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: 1

*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**

Terrence J. Hancock  
Type or Print Name

**Signature:**

Terrence Hancock

**ATTEST:**

**Secretary:**

Roberta Lester  
Type or Print Name

**Signature:**

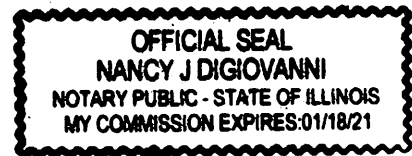
Roberta Lester

**SUBSCRIBED AND SWORN TO**

before me this 19th

day of June, 2020.

Nancy J. DiGiovanni  
(Notary Public)



Commission Expires: 1/18/21

MY COMMISSION EXPIRES 07/18/21  
NOTARY PUBLIC - STATE OF ILLINOIS  
NANCY J DIGIOVANNI  
OFFICIAL SEAL