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

2011
APPLICATION FOR LICENSE TO SELL RAFFLE TICKETS

(This is a two-sided 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: 9/8/11

PRESIDENT OR PRESIDING OFFICER: Marc Lochow

SECRETARY: Heather Warthen

ADDRESS OF APPLICANT: _____

_____

ORGANIZATION REQUESTING LICENSE: Orland Park Area Chamber of Commerce

ADDRESS OF ORGANIZATION: 8799 W. 151st St.
Orland Park IL 60462

NAME AND ADDRESS OF RAFFLE MANAGER: Kelorgn Putnam
8799 W. 151st St. Orland Park IL 60462

PHONE 708-349-2972

ADDRESS OF PLACE(S) OR AREA(S) WHERE CHANCES ARE TO BE SOLD OR ISSUED:
Sandburg High School, 13300 S. LaGrange Road, Orland Park IL 60462

PURPOSE OF RAFFLE: Community Expo Raffle for Chamber of Commerce

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: 9:00Am - 1:00pm

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: 200

PRICE OF CHANCES: $1.00 **TOTAL PRIZE VALUE:** $800 **LARGEST SINGLE PRIZE:** $250

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

1:00pm (Time) 10/15/11 (Date) Sandburg High School (Location of Raffle Drawing (Address, City, State))

CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

Religious _____ **Charitable** _____ **Labor** _____ **Fraternal** _____ **Business** X

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: 53 years

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: 1958 - Orland Park

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

_____

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: 500

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 Marc Lachow
Type or Print Name

Signature: _____

ATTEST:

Secretary: _____
Type or Print Name

Signature: _____

SUBSCRIBED AND SWORN TO

before me this _____

day of _____, **20**____.

_____
(Notary Public)

Commission Expires: _____

/nm
1/11