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 comp	leted by Village staff)
Date Approved:	
Date Denied:	
Approval:	Village Clerk
Expires:	
	D APPLICATION S 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: March 1, 2017				
PRESIDENT OR PRESIDING OFFICER: Scott Reifert				
SECRETARY: Howard Pizer				
ADDRESS OF APPLICANT: 333 W 35th 5th				
Chicago, 16 60616				
organization REQUESTING LICENSE: Chicago White Sox Charities				
ADDRESS OF ORGANIZATION: 333 W 35th St				
Chicago, 16 606/6				
Christine O'Rielly-Riordan MANAGER: 333 W 354 St Chiago, 160616 PHONE 312-674-5387				
CJ Wilson Mazda 2910 W 1594 St				
Chicago White Sox Charities				
IME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: $\frac{3/39/18 - 8/31/18}{}$				
AXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: 25, 000				
RICE OF CHANCES: \$10 TOTAL PRIZE VALUE: 23 SINGLE PRIZE: \$13, 135				
IME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED: 1.00 pm 9 0 18 Guaranteed Rate Field 333 w 35 h Location of Raffle Drawing (Address, City, State) Chicago, 1606				

CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

Religious Charitable	Labor	Fraternal	Business
Educational Veterans' Or	rganization	*Non-Profit Fund Rais	ing
*(check this box if organized solely to raise hardship, as a result of illness, disability, a	e funds for an individu accident or disaster)	al or group of individuals suj	ffering extreme financial
LENGTH OF TIME ORGANIZATION	ON HAS BEEN IN	EXISTENCE:	
PLACE AND DATE OF INCORPOR	RATION OF ORGA	NIZATION:	
IF NOT A CORPORATION, STATE	E WHEN AND HOV	V ORGANIZED:	
NUMBER OF MEMBERS OF ORG	ANIZATION THAT	Γ RESIDE IN VILLAGE:	
The undersigned, under oath attest to ordinance of the Village of Orland I operate raffles" and we further atte	Park establishing a	system for the licensing	of organizations to
Further the undersigned attest that that violations of this ordinance are not more than seven-hundred-and seven-hundred and seven-hundred and seven-hundred are seven-hundred.	subject to fines of i	not less than one-hundre	se #3480 and understand ad dollars (\$100.00) and
President or Presiding Officer Scattering Type	ReiFer-	\	
Signature:			
ATTEST:	y		
Secretary: Howar	e on Print Name		
Signature:	anny	M	
SUBSCRIBED AND SWORN	ГО	•	
before me this /a ===================================			
day of March, 2018.	,	MICHA	CIAL SEAL" EL J. MAZZA
(Notary Public)	<u> </u>		JC, STATE OF ILLINOIS On Expires 11/19/2018
Commission Expires: /////	2018		