

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

2014  
**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: 5/12/2014

PRESIDENT OR PRESIDING OFFICER: [Signature]

Assistant SECRETARY: Mary Matthews

ADDRESS OF APPLICANT: 3075 Highland Parkway  
Downers Grove, IL 60515

ORGANIZATION REQUESTING LICENSE: Advocate Children's Hospital - Oak Lawn

ADDRESS OF ORGANIZATION: 4440 W. 95th St.  
Oak Lawn, IL 60453

NAME AND ADDRESS OF RAFFLE MANAGER: Marina Khalfina  
3075 Highland Parkway  
Downers Grove, IL 60515  
PHONE 630-929-6944

ADDRESS OF PLACE(S) OR AREA(S) WHERE CHANCES ARE TO BE SOLD OR ISSUED: Silver Lakes Country Club 14700 S. 82nd St Orland Park, IL 60462

PURPOSE OF RAFFLE: Raise funds for Advocate Children's Hospital - Oak Lawn Cardiac Neurodevelopmental Program

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: 6/4/2014

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: 300 (estimate)

PRICE OF CHANCES: 1/\$10 3/\$20 10/\$40 TOTAL PRIZE VALUE: estimated 1,500 LARGEST SINGLE PRIZE: \$500 (estimate)

TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED:  
5-6pm 9/17/2014 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 X 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: 30 years

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: IL 2/9/1984

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

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: 0

*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 PAT SMITH-CALASCI BETTA  
Type or Print Name

Signature: *Pat Smith-Calasci Betta*

ATTEST:

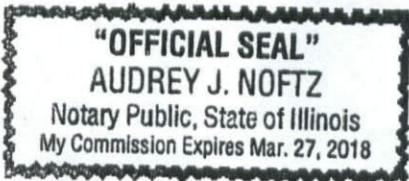
Assistant Secretary: Mary Matthews  
Type or Print Name

Signature: *Mary Matthews*

**SUBSCRIBED AND SWORN TO**

before me this 13  
day of May, 20 14.

*Audrey J. Noftz*  
(Notary Public)



Commission Expires: 3/27/18