

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

2012
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:

11/27/12

PRESIDENT OR PRESIDING OFFICER:

Paul Arimes, Village Manager

SECRETARY:

ADDRESS OF APPLICANT:

ORGANIZATION
REQUESTING LICENSE:

Village of Orland Park

ADDRESS OF ORGANIZATION:

14700 Ravinia Ave.
Orland Park, IL 60462

NAME AND ADDRESS
OF RAFFLE
MANAGER:

Jane Brukema
Recreation Dept.

PHONE 708/403-6278

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

Orland Civic Center

PURPOSE OF RAFFLE:

Chilly Willie Challenge
Raffle to Benefit Orland Park Recreation
Special Recreation Division

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED:

2-5 pm

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED:

1000

PRICE OF CHANCES: 3 for \$5

TOTAL PRIZE VALUE: varies

LARGEST
SINGLE PRIZE:

\$500-

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

5pm
Time

1/19/13
Date

Orland Civic Center
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: _____

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: _____

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

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: _____

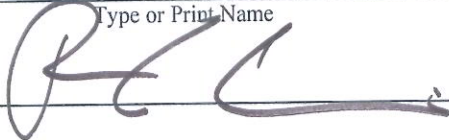
The undersigned, under oath attest that we have read and understand Ordinance #3480 entitled "An ordinance of the Village of Orland Park establishing a system for the licensing of organizations to operate raffles" and we further attest to the non-profit character of the prospective license organization.

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**

**Paul G. Grimes
Village Manager**

Signature:

Type or Print Name


ATTEST:

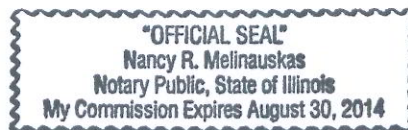
Secretary:

Type or Print Name

Signature:

SUBSCRIBED AND SWORN TO

before me this 28th
day of November, 2012



Nancy R. Melinauskas
(Notary Public)

Commission Expires: Aug 30, 2014