

Year: 2020

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

APPLICATION FOR LICENSE TO SELL

RAFFLE TICKETS

(This is a two-page 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: 03/02/2020

PRESIDENT OR PRESIDING OFFICER: Randy Nicholson

SECRETARY: Don Ward

ADDRESS OF APPLICANT: 11605 Blackburn Dr

Orland Park, IL 60467

Knights of Columbus

ORGANIZATION

REQUESTING LICENSE:

Council # 10858 & Council # 16369

14327 Highland Ave

ADDRESS OF ORGANIZATION:

15050 Wolf Rd

Orland Park, IL 60462

NAME AND ADDRESS
OF RAFFLE
MANAGER:

Louise Johnson

14925 Creek Crossing Dr
Orland Park, IL 60467

PHONE: 708-370-4226

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

Papa Joe's 14459 S. LaGrange Rd Orland Park

PURPOSE OF RAFFLE: Raise funds for charitable

distributions.

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: Weekly

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

PRICE OF CHANCES: ^{6 for \$5}
^{13 for \$10} 27 for \$20 TOTAL PRIZE VALUE: progressive LARGEST SINGLE PRIZE: \$50,000

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

8:00 PM Friday Weekly Papa Joe's 14459 S. LaGrange Rd
Orland Park, IL 60462 **OVER**

CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

Religious _____ Charitable _____ Labor _____ Fraternal X 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: Council #10858 - 27yr.
Council #16369 - 4yr.

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: _____

IF NOT A CORPORATION, STATE WHEN AND HOW ORGANIZED: Catholic Fraternal
service organization founded in 1882

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: 100

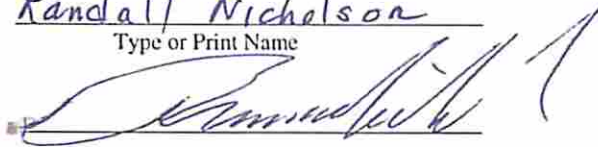
The undersigned, under oath attest that we have read and understand Ordinance #3480 entitled "An ordinance of the Village of Orland Park establishing a system for the licensing of organizations to operate raffles" and we further attest to the non-profit character of the prospective license organization.

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

Randall Nicholson
Type or Print Name

Signature:



ATTEST:

Secretary:

Don Ward
Type or Print Name

Signature:



SUBSCRIBED AND SWORN TO

before me this _____

day of _____, 20____.

(Notary Public)

Commission Expires: _____