

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: 02/11/14

PRESIDENT OR PRESIDING OFFICER: Kevin Mcbee

SECRETARY: Coleen Barkmeier

ADDRESS OF APPLICANT: ~~2330~~ 10501 Emilie Lane
Orland Park, IL 60467

ORGANIZATION REQUESTING LICENSE: Smith Crossing

ADDRESS OF ORGANIZATION: 10501 Emite Lane
Orland Park, IL 60467

NAME AND ADDRESS OF RAFFLE MANAGER: Coleen Barkmeier c/o Smith Senior Living
2320 W. 113th Place, Chicago, IL 60643
PHONE 773 474-7351

ADDRESS OF PLACE(S) OR AREA(S) WHERE CHANCES ARE TO BE SOLD OR ISSUED: Smith Crossing, 10501 Emilie Lane, Orland Park, IL 60467

PURPOSE OF RAFFLE: Raise money for Emilie's Fund which supports Smith Crossing residents who have outlived their means

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: 2/14 - 5/1/14

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: 1,000

PRICE OF CHANCES: 25 TOTAL PRIZE VALUE: \$18,000 LARGEST SINGLE PRIZE: \$5,000

TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED: Tom May 1, 2014 10501 Emilie Lane, Orland Park, IL

OVER

CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

Religious _____ Charitable 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: 14+ years

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: August 2, 1999

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

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: 2 board members in addition to the over 250 residents of Smith Crossing

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 Kevin McGee
Type or Print Name

Signature: [Handwritten Signature]

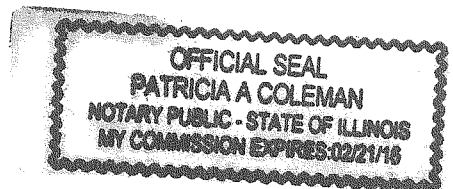
ATTEST:
Secretary: Coleen Barkmeier
Type or Print Name

Signature: [Handwritten Signature]

SUBSCRIBED AND SWORN TO

before me this February 11, 2014
day of February, 2014.

Patricia A. Coleman
(Notary Public)



Commission Expires: 2-21-16