

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

2015

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: August 26, 2015

PRESIDENT OR PRESIDING OFFICER: Donald Vacha

SECRETARY: See Vacha Post Duffy

ADDRESS OF APPLICANT: 13300 Slagrange Rd

Orland Park, IL 60462

ORGANIZATION
REQUESTING LICENSE: Carl Sandburg HS Music Boosters

ADDRESS OF ORGANIZATION: 13300 Slagrange Rd

Orland Park IL 60462

NAME AND ADDRESS
OF RAFFLE
MANAGER: Chris Babcock c/o Music Boosters

13300 Slagrange Rd Orland Park 60462

PHONE 708-932-9220

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

Carl Sandburg High School, 13300 Slagrange Rd Orland Park
PURPOSE OF RAFFLE: a fundraiser for The Music Boosters/ Students
which funds needs not covered by School Budget

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: 8/27-12/31/2015

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: 1000

PRICE OF CHANCES: \$10 TOTAL PRIZE VALUE: \$2000 LARGEST SINGLE PRIZE: \$100

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

January 19, 2016 7:00 pm Carl Sandburg HS
Time Date Location of Raffle Drawing (Address, City, State) 13300 Slagrange Rd Orland Park

OVER

Room E113

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: 20+ years

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: Springfield IL

IF NOT A CORPORATION, STATE WHEN AND HOW ORGANIZED: 5/1/83

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: 360+

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

Donald P. Vacha

Type or Print Name

Signature: Donald P. Vacha

ATTEST:

Secretary: Patrick Duffy

Type or Print Name

Signature: Patrick Duffy

SUBSCRIBED AND SWORN TO

before me this 21st

day of August, 20 15

Deborah D'Attomo

(Notary Public)

Commission Expires: 9-18-18

