

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

2013
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:

8-29-13

PRESIDENT OR PRESIDING OFFICER:

Marc Lochow

SECRETARY:

Debi Ross

ADDRESS OF APPLICANT:

ORGANIZATION
REQUESTING LICENSE:

Orland Park Area
Chamber of Commerce
8799 W. 151st Street
Orland Park, IL 60462

ADDRESS OF ORGANIZATION:

NAME AND ADDRESS
OF RAFFLE
MANAGER:

Keloryn Putnam
8799 W. 151st St.
Orland Park, IL 60462
PHONE 708-349-2972

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

Carl Sanburg High School 13300 So LaGrange Rd.
Orland Park, IL 60462

PURPOSE OF RAFFLE:

Community Expo Fundraiser
for Chamber of Commerce

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED:

9am-1pm

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED:

700

PRICE OF CHANCES:

\$1

TOTAL PRIZE VALUE:

\$1000

LARGEST
SINGLE PRIZE:

\$150

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

1pm
Time

10/19/13
Date

Carl Sanburg High School
13300 So LaGrange Rd.
Location of Raffle Drawing (Address, City, State)

Orland Park, IL 60462

OVER

CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

Religious _____ Charitable _____ Labor _____ Fraternal _____ Business X

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: 55 years

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: 1958, Orland Park

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

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: 500

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

Marc Lochow
Type or Print Name

Signature:

[Signature]

ATTEST:

Secretary:

Type or Print Name

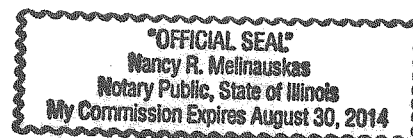
Signature:

SUBSCRIBED AND SWORN TO

before me this 29th

day of August, 2013.

Nancy R. Melinauskas
(Notary Public)



Commission Expires: Aug 30, 2014