

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: 11/12/13

PRESIDENT OR PRESIDING OFFICER: Michael Hughes

SECRETARY: Chip Holme

ADDRESS OF APPLICANT: 133 Whispering Lake Dr.
Palos Park, IL 60464

ORGANIZATION REQUESTING LICENSE: St. Michael School

ADDRESS OF ORGANIZATION: 14355 Highland Ave.
Orland Park, IL 60462

NAME AND ADDRESS OF RAFFLE MANAGER: Kelly McHugh
13057 Watson Court, Palos Park 60464
PHONE 708-877-5031

ADDRESS OF PLACE(S) OR AREA(S) WHERE CHANCES ARE TO BE SOLD OR ISSUED:
School: 14355 Highland Ave. O.P. ; Church: 14327 Highland Ave., O.P.

PURPOSE OF RAFFLE: Education Fund

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: 2/18/14 - 3/8/14

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: 500

PRICE OF CHANCES: \$100 TOTAL PRIZE VALUE: \$6,800 LARGEST SINGLE PRIZE: \$6800

TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED:
10:00pm 3/8/14 14355 Highland Ave Orland Park, IL
Time Date Location of Raffle Drawing (Address, City, State)

OVER

CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

Religious _____ Charitable _____ Labor _____ Fraternal _____ Business _____

Educational X 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: 146 yrs.

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: _____

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

501(c)3 non-profit through the Archdiocese of Chicago

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: 600

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 Michael Hughes
Type or Print Name

Signature: [Handwritten Signature]

ATTEST:

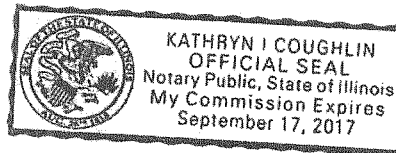
Secretary: CHARLES B. HUNNE II
Type or Print Name

Signature: [Handwritten Signature]

SUBSCRIBED AND SWORN TO

before me this NOV.

day of 16, 2013.



[Handwritten Signature]
(Notary Public)

Commission Expires: 9/17/17