

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

2010
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: 2/14/11
PRESIDENT OR PRESIDING OFFICER: John Blazek
SECRETARY: _____
ADDRESS OF APPLICANT: 525 W. Monroe St., Ste 900
Chicago, IL 60661
ORGANIZATION REQUESTING LICENSE: National Multiple Sclerosis Society
Greater IL Chapter
ADDRESS OF ORGANIZATION: 525 W. Monroe St., Ste. 900
Chicago, IL 60661
NAME AND ADDRESS OF RAFFLE MANAGER: Lori Carroll
9131 Walnut Lane, Tinley Park, IL
PHONE 708-334-9190 (cell) 60487

ADDRESS OF PLACE(S) OR AREA(S) WHERE CHANCES ARE TO BE SOLD OR ISSUED:
Centennial Park, Village of Orland Park (area east of the
corner of 153rd + the metra parking lot)
PURPOSE OF RAFFLE: -All proceeds will go directly to research,
programs + services that benefit people + their
families living with MS.
TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: 7:30 am - 11:30 am

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED: 500-800
PRICE OF CHANCES: \$1/each or 6 for \$5 TOTAL PRIZE VALUE: \$3000.00 LARGEST SINGLE PRIZE: \$300.00

TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED:
Time _____ Date 5/1/11 Location of Raffle Drawing (Address, City, State) Centennial Park, 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 X

*(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: 59 years

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: Chicago, IL

IF NOT A CORPORATION, STATE WHEN AND HOW ORGANIZED: Non-profit

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: _____

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 John V. Blazek
Type or Print Name

Signature: John V. Blazek

ATTEST:
Secretary: Ronald A. Bernstein
Type or Print Name

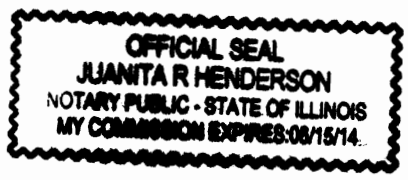
Signature: Ronald A. Bernstein

SUBSCRIBED AND SWORN TO

before me this 15th

day of February, 2011.

Juanita R. Henderson
(Notary Public)



Commission Expires: 06/15/14