

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

2018
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:

9/10/18

PRESIDENT OR PRESIDING OFFICER:

Mike Ahlert

SECRETARY:

Kristina Laib

ADDRESS OF APPLICANT:

10498 163rd Place
Orland Park, IL 60467

ORGANIZATION
REQUESTING LICENSE:

Orland Park A's ~~Fast~~ Fast Pitch

ADDRESS OF ORGANIZATION:

P.O. Box 2543
Orland Park, IL 60462

NAME AND ADDRESS
OF RAFFLE
MANAGER:

Krista Stoker
10498 163rd Place, Orland Park,
PHONE 618-978-0794 IL 60467

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

Orland Park Civic Center - 14750 S Ravinia Ave,
PURPOSE OF RAFFLE: 50/50 & gift baskets
Fundraiser
Orland Park
IL 60467

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED:

1 day 11/9/18 6-10pm

MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED:

1000

PRICE OF CHANCES:

\$1/ticket

TOTAL PRIZE VALUE:

\$500

LARGEST

SINGLE PRIZE:

\$100

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

9pm
Time

11/9/18
Date

Orland Park Civic Center
Location of Raffle Drawing (Address, City, State)

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: 20 years

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: 4/6/12

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

NUMBER OF MEMBERS OF ORGANIZATION THAT RESIDE IN VILLAGE: 40-50

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 Mike Ahlert
Type or Print Name

Signature: Mike Ahlert

ATTEST:
Secretary: Kristina Laib
Type or Print Name

Signature: Kristina Laib

SUBSCRIBED AND SWORN TO

before me this 10th

day of Sept., 2018.

Paula Giaouris George
(Notary Public)



Commission Expires: 07/21/21

