

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

2014
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: 5-27-12

PRESIDENT OR PRESIDING OFFICER: PAUL O'GRADY, SUPERVISOR

SECRETARY: CINDY MURRAY, CLERK

ADDRESS OF APPLICANT: 14807 RAVINIA
ORLAND PARK, IL 60462

ORGANIZATION REQUESTING LICENSE: ORLAND TOWNSHIP FOOD & PET PANTRY

ADDRESS OF ORGANIZATION: 14807 RAVINIA
ORLAND PARK, IL 60462

NAME AND ADDRESS OF RAFFLE MANAGER: MARIANNE HILL
14807 RAVINIA, ORLAND PARK
PHONE 708-403-4222

ADDRESS OF PLACE(S) OR AREA(S) WHERE CHANCES ARE TO BE SOLD OR ISSUED: 14807 RAVINIA, ORLAND PARK, IL 60462

PURPOSE OF RAFFLE: FUND RAISER FOR ORLAND TOWNSHIP
PET PANTRY

TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: SAT. JUNE 14, 2014
12:00 PM - 3:00 PM

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

PRICE OF CHANCES: 6 For \$5.00 LARGEST SINGLE PRIZE: _____
1.00 EA. TOTAL PRIZE VALUE: _____

TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED: 12:00 PM - 3:00 PM 6-14-14 14807 RAVINIA, ORLAND PARK, IL 60462 **OVER**

Time Date Location of Raffle Drawing (Address, City, State)

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: FOOD PANTRY - 1983

PLACE AND DATE OF INCORPORATION OF ORGANIZATION: 1850

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

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 Paul O'Grady, Supervisor
Type or Print Name

Signature: *Paul O'Grady*

ATTEST:

Secretary: Cindy Murray, Clerk
Type or Print Name

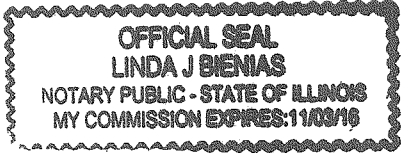
Signature: *Cindy Murray*

SUBSCRIBED AND SWORN TO

before me this 27TH

day of May, 2014.

Linda J. Bienias
(Notary Public)



Commission Expires: 11-3-16