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

2010 APPLICATION FOR LICENSE TO SELL RAFFLE TICKETS

(This is a <u>two-sided</u> application)

(To be completed by Village staff)	
Date Approv	ed:
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:	9-1.10	
PRESIDENT OR PRESIDING OFFICER: John Bibau		
SECRETARY:	mare Lochow	
ADDRESS OF APPLICANT:		
ORGANIZATION REQUESTING LICENSE:	Orland Park Area Chamber of Commin	
ADDRESS OF ORGANIZATION:	8799 W. 151st St. Orland Park IL 60462	
NAME AND ADDRESS OF RAFFLE MANAGER:	Keloryn Putnam 8799 W. 151 stSt. Orland Park 6046 PHONE 708-349-2972	
ADDRESS OF PLACE(S) OR AREA(S) WHERE CHANCES ARE TO BE SOLD OR ISSUED:		
Sandburg High 5 chos 1 13300 S. La Grange OP 6046		
PURPOSE OF RAFFLE: - Community Expo-Fundraiser		
For Chamber of Commun		
TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: 9Am - 1.00 pm		
MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED:		
PRICE OF CHANCES: TOTAL PRIZE VALUE: 800° SINGLE PRIZE: 250		
TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED:		
1:00 pm Bandburg High School 133005, WER Grange Road		
1:00 pm Sandburg High School 133005, Excrange Road Time Date Loodion of Raffle Drawing (Address, City, State) O-16-10 Oxford Park, IL 40462		

CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION Fraternal Charitable Labor Business Religious *Non-Profit Fund Raising Educational Veterans' Organization *(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: PLACE AND DATE OF INCORPORATION OF ORGANIZATION: 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** Signature: ATTEST: Secretary: Signature: SUBSCRIBED AND SWORN TO before me this day of Spotember (Notary Public)

/nm 1/10

Commission Expires: May 26, 2014