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

2019 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		
·	S SUBMITTING APPLICATION)	
DATE OF APPLICATION:	018/19	
$\label{eq:president} \textbf{PRESIDENT OR PRESIDING OFFICER:}$	KEN I-RANK A. KURLICT	
SECRETARY:	SAUL SMITH	
ADDRESS OF APPLICANT:	14355 HIGHLAND AUG.	
	DRLAND PL, 12 60462	
ORGANIZATION REQUESTING LICENSE:	ST. MICHAEL PARISH	
ADDRESS OF ORGANIZATION:	14327 HIGHLAND AVE DRIAND PK, IL 60462	
NAME AND ADDRESS OF RAFFLE MANAGER:	REV. FRANK J. KURUCZ 14327 HIGHLAND ARE. PHONE 708-349-0903	
ADDRESS OF PLACE(S) OR AREA(S) WHERE CHANCES ARE TO BE SOLD OR ISSUED:		
PURPOSE OF RAFFLE: FUND RAISER FOR St. MCHAP SARSH		
TIME PERIOD WHICH RAFFLE CHANCES WILL BE SOLD OR ISSUED: $\frac{9/2 - 9/5}{2019}$		
MAXIMUM NUMBER OF RAFFLE CHANCES TO BE SOLD OR ISSUED:		
PRICE OF CHANCES: 40 TOTAL P	RIZE VALUE 20,500 SINGLE PRIZE: 40,000	
TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED:		
5m 9/15/19 1437 Time Date PAR	7 HIGHLAWN NB OKLAWN Pk, /L 2046 Z Location of Raffle Drawing (Address, City, State)	
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CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION Charitable _____ Labor ____ Fraternal ____ Religious Business 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: 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: 13 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 OFFICIAL SEAL DIANA VITELA (Notary Public)

/as 11/18

Commission Expires: APRIL 20,2020