Year: 20 20

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

APPLICATION FOR LICENSE TO SELL RAFFLE TICKETS

(This is a two-page application)

(To be completed by Village staff)		
Date Approved:		
Date Denied:		
Approval: Village Clerk		
Expires:		
APPROVED APPLICATION SERVES AS LICENSE	1	

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:	february 10, 2020		
PRESIDENT OR PRESIDING OFFICER	Scott Reifert		
SECRETARY:	Howard Pizer		
ADDRESS OF APPLICANT:	333 W 35* S+		
	Chicago, 12 60616		
ORGANIZATION REQUESTING LICENSE:	Chicago White Sox Charities		
ADDRESS OF ORGANIZATION:	333 w 35+ S+		
	Chicago, 1L 60616		
NAME AND ADDRESS OF RAFFLE MANAGER:	Christine o' Reilly - Riordan 333 w 35h St Chicago, 12 60616		
	PHONE 312-674-5387		
ADDRESS OF PLACE(S) OR AREA(S) WHERE CHANCES ARE TO BE SOLD OR ISSUED:			
Orland Park Mazda	8910 W 157" St		
PURPOSE OF RAFFLE: Fundraising vaffle to benefit			
Chicago White Sox	Charities		
TIME PERIOD WHICH RAFFLE CHANCES	SWILL BE SOLD OR ISSUED: 3/26/2020 - 8/31/2020		
MAXIMUM NUMBER OF RAFFLE CHANC	ES TO BE SOLD OR ISSUED: 25, 000		
	PRIZE VALUE: 23,145 SINGLE PRIZE: 23,145		
TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED: OVER			
1:00 pm 9/3/200	30 Gravanteed Rate Field		

CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

CHECK THE OF NON-IROTH ORGANIZATION AND	
Religious Charitable Labor Fraternal	Business
Educational Veterans' Organization *Non-Profit Fu	nd Raising
*(check this box if organized solely to raise funds for an individual or group of individual hardship, as a result of illness, disability, accident or disaster)	luals suffering extreme financial
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 VII	LAGE:
The undersigned, under oath attest that we have read and understand Coordinance of the Village of Orland Park establishing a system for the lie operate raffles" and we further attest to the non-profit character of the	censing of organizations to
Further the undersigned attest that they comply with all provisions of O that violations of this ordinance are subject to fines of not less than one not more than seven-hundred-and-fifty dollars (\$750.00) per violation.	rdinance #3480 and understand -hundred dollars (\$100.00) and
President or Presiding Officer Scott Reffert Type of Print Name	
Signature:	
ATTEST:	
Secretary: Howard Pizer Type or Print Name	
Signature:	OFFICIAL SEAL MICHAEL J. MAZZA Notary Public - State of Illinois My Commission Expires 11/20/2022
SUBSCRIBED AND SWORN TO	
before me this 12 The state of	Sub chibid and Sown 100 De Some me to 14th
day of FEBRUARY, 20 20.	day of to brusy, 2020
Notary Public)	Wahary Public
Commission Expires: 05-26-2020	Commission expires: 11/20/2022