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*******APPLICATION FOR RAFFLE LICENSE**

1) Applicant Organization: _____
Name

Address

City/Village State Zip

Telephone Number Email or Fax

2) Tax-Exempt Status: 501(c) () ← **Insert Number, or N/A** if tax-exempt status not applied for.

3) Illinois Charitable Org. Reg. No. (N/A if exempt from filing): _____

4) If both 2 and 3 above are N/A, please attach copy of by-laws or detailed statement of organization's purposes.

5) Designated Raffle Manager: _____
Name

Address

City/Village State Zip

Telephone Number Email or Fax

6) Specific location(s) in the City of Hickory Hills where raffle chances will be sold or issued:

7) Chances will be sold beginning on: ____ / ____ /20 8) Date of Drawing: ____ / ____ /20

8) Location of drawing: _____

9) The cost of a single raffle chance (Cannot exceed \$200): _____

10) The total retail value of all prizes awarded (Cannot exceed \$1,000,000): _____

11) List all prizes (Attach separate sheet if necessary):

For items 12 through 15 below, please initial yes or no. All three signatures are required and must be notarized. If one individual is both an officer and raffle manager, please sign in both places.

12) Has applicant organization been in existence for at least five years?

_____ Yes

_____ No (If no, raffle license will only be issued to a non-profit fundraising organization that is organized for the sole purpose of providing financial assistance to a specified individual suffering financial hardship due to illness, disability, accident or disaster.)

13) Applicant organization agrees to submit to the City of Hickory Hills a complete accounting of each raffle's gross proceeds, expenses and net proceeds, and the distribution of net proceeds within 15 days of drawing. Applicant organization also agrees to retain raffle records for 3 years after drawing.

_____ Yes, applicant has read Item 13 and agrees to comply.

14) Raffle Manager's Fidelity Bond is attached.

_____ Yes, bond is attached.

_____ No, the bond requirement has been waived by unanimous vote of applicant organization's governing board and the City Clerk.

15) _____ \$25.00 annual License fee is attached.

The undersigned swear or affirm that _____ is a bona fide religious, charitable, labor, business, fraternal, educational or veteran's organization that operates without profit to its members. The undersigned certify that they have read the City of Hickory Hills Municipal Code regarding raffles and are in compliance with all provisions. The undersigned certify that no officer or manager of the organization has been convicted of a felony or has been a professional gambler or gambling promoter. The undersigned also certify that the information provided herein is true and correct.

Signature of Designated Raffle Manager Date

Signature of Presiding Officer Date

Signature of Secretary Date

SUBSCRIBED and SWORN to before Seal:

me this _____ day of _____, _____

Notary Public