Application for License to Conduct a Raffle

City of Oregon, Illinois
115 N. 3rd St. ◆ Oregon, IL 61061 ◆ (815)732-6321 ◆ Fax: (815)732-7292

Da	te:				
1.	Organization:	18			
2.	Address:				
3.	Mailing Address (if different t	from above):			
4.	Location of Raffle Drawing: _	500 500 M		(1.5.49.88.40.00.00.00.00.00.00.00.00.00.00.00.00.	
5.	Address:				
6.	Date:	Day of Week:		Time:	
7.	Date of Ticket Sales: From:	:	To: _		
8.	Location of Ticket Sales:				
9.	Type of Organization (attach documentary evidence):				
	Religious	Charitable		Labor	
	Fraternal	Educational		Veterans	
10.	How long has this organiza	tion been in existen	ce?		
11.	Date and place of incorpora	ation (if incorporated	l):		
12.	Number of members in good	od standing?	13.00	176,240.10	
13.	Raffle Manager:	2	Phone	e No:	
14.	Total retail value of all prize	es to be awarded: \$			
15.	Maximum retail value of ea	ch prize to be award	ded: \$		
16.	Maximum price charged for	r each chance to be	sold: \$_		
	Maximum number of chances to be issued:				
	Are you bonded? Yes				
	If so, name of company b	oonded with:			
	-OR- request that surety	be waived:			

19. Attestation:

The undersigned attest that the above named organization is organized not-for-profit under the laws of the State of Illinois and has been in existence continuously for a period of 5 years immediately preceding the date of this application and that during said 5 year period has maintained a bonafide membership actively engaged in carrying out the purposes of the organization. The undersigned to hereby state under penalties of perjury that all statements in the foregoing application are true and correct and all of the named individuals herein are bonafide members of the sponsoring organization, all are of good moral character and have not been convicted of a felony. If a license is granted hereunder, the undersigned will be responsible for the conduct of the raffle in accordance with the laws of the State of Illinois and the City of Oregon concerning the conduct of such raffle.

Presiding Officer/Secretary/Raffle Manager	Date
2	
pproved:	
ate:	-
sy:	