

APPLICATION FOR A RAFFLE

1. Name and address of organization: _____

2. Type of organization (i. e. religious, charitable, labor, fraternal, educational, veteran, etc): _____

3. Length of existence of the organization and, if incorporated, the date and state of incorporation: _____

4. Name, address, phone number, and date of birth of the organization's presiding officer, secretary, raffles manager and any other members responsible for the conduct and operation of the raffle (please attach more pages if needed): _____

5. The aggregate retail value of all prizes or merchandise awarded by the licensee in a single raffle: _____

6. The maximum retail value of each prize awarded by a licensee in a single raffle: _____

7. The maximum prize which may be charged for each raffle chance issued or sold: _____

8. The maximum number of days during which chances will be sold or issued: _____

9. The area in which the raffle chances will be sold or issued: _____

10. The time period during which raffle chances will be sold or issued:

11. The date, time and name and address of the location or locations at which winning chances will be determined: _____

12. Please attach a sworn statement attesting to the not-for-profit character of the prospective licensee organization signed by the presiding officer and the secretary of that organization.

13. A certificate signed by the presiding officer of the applicant organization attesting to the fact that the information contained in the application is true and correct.

14. This application shall be accompanied by a non-refundable filing fee. Such fee shall be paid by cash, check, cashier's check or money order in the amount of \$25.00.

NOTE: The governing statute states that all systems for raffles shall provide for limitations upon (1) the aggregate retail value of all prizes or merchandise awarded by a licensee in a single raffle, (2) the maximum retail value of each prize awarded by a licensee in a single raffle, (3) the maximum price which may be charged for each raffle chance issued or sold and (4) the maximum number of days during which chances may be issued or sold.

Person signing application: _____

Position held in Applicant Organization: _____

The undersigned, _____, certifies that he/she is the authorized agent of the Applicant Organization, _____, and signs this application as such authorized agent. The undersigned further certifies that all person's named in paragraph 4 of this application are not: (a) convicted felons; (b) persons who are or have been professional gamblers or gambling promoters; (c) persons of bad moral character.

The Applicant Organization agrees to provide any additional information, as requested by the Village of Aviston, that may be needed to verify that the Applicant Organization is authorized to receive a raffle license as set forth in the laws of the State of Illinois and Village of Aviston Code of Ordinances, or any amendments thereto.

The undersigned hereby affirms, under penalties of perjury, that all information in this application is true, correct and complete to the best of my knowledge and belief.
