

600 Main St. NW Bourbonnais, IL 60914 815-937-3570 Fax: 815-937-3467

bourbonnais@villageofbourbonnais.com www.villageofbourbonnais.com

APPLICATION FOR RAFFLE LICENSE

(Pursuant to Chapter 18 Article IV of the Code of Ordinances)

A license fee of \$25.00 shall be paid prior to any license issuing.

Please type or print in ink all required information.

1.	Name and address of Licensee (the not-for-profit organization with the following characters: religious, charitable, labor, business, fraternal, educational or veterans organization) (Please state the character of the organization):			
2.	Name and address of officers of the organization: a. Chairman or Presiding Officer:			
		Phone: Email:		
	b. Secretary:			
		Phone: Email:		
3.	Name and address of the "Raffles Manager" (individual (s) responsible for the conduct o raffle):			
4.	First and last dates for sale of raffle chances:			
5.	Location (s) at which raffle chances will be sold or issued:			
6.	 Nu	mber of raffles to be held:		
7.	Date (s) of determination of winning chance (s):			
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8.	Location(s) at which winning chance(s) will be determined:		
٥	Cost of tickets:		
	Cost of tickets:		
10.	Quantity of Tickets to be sold:		
11.	What will the funds raised be used for:		
12.	Briefly describe the prize(s) and value(s) of prizes:		
The und	dersigned hereby swear and affirm that:		
organiz receive all prov license	(Insert name al, educational or veteran's organization requesting liced under the laws of the State of Illinois, and the orga a raffle license as prescribed by the Ordinances Chaprisions included therein. We understand that failure to granted. The of Chairman	nization and persons herein are eligible to ter 18 Article IV and agree to comply with	
		<u>-</u>	
Print na	ame:	-	
Signatu	re of Secretary	_	
Print na	ame:	-	
Subscri	bed and sworn to me this		
	day of		
		(SEAL)	
Notary	Public Signature		