

APPLICATION FOR LICENSE TO CONDUCT RAFFLES

1.	Name of Organization: Address: Woodlawn Middle School PTO (03/07 Gilmer Road
	Long Envie, IL 60047
2.	Organization Representative:
3.	Telephone Number of Representative: 312-287-2324
4.	Type of Organization Religious Charitable Labor Educational Business Fraternal Veterans Governmental
5.	Date and location in which raffle chances will be sold and raffle drawing will occur: Raffle Date Raffle Location Drawing Date Drawing Location Drawing Drawing Location Drawing Drawi
6.	Please answer the following yes or no questions: a. Has the organization been in existence longer than 5 years? b. Does the aggregate retail value of prizes exceed \$100,000? c. Does the maximum retail value of each prize exceed \$50,000? d. Will the maximum price of a raffle ticket exceed \$500? e. Will you be seeking a waiver of the \$25 license fee because all proceeds will go to charity? Other reasons explain: f. Is the person conducting the raffle bonded by a \$10,000 bond? g. Are you seeking a waiver of the raffle manager bond requirement?
	The undersigned affirms that he/she is an authorized representative of the sponsor organization, that the statements made herein are true and correct to the best of his/her knowledge; and that he/she will be responsible for the conduct of the raffle in accordance with the provisions of the laws of the State of Illinois and the Village of Long Grove governing the conduct of raffles. Date Date Signature of Secretary Date Da
	Signature of Village President Date Signature of Village Clerk Date