

**APPLICATION FOR LICENSE  
TO OPERATE A RAFFLE**

**CITY OF RED BUD  
200 E MARKET ST  
RED BUD, IL 62278**

DATE  
FEE: \$1.00 PAID: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE INCORPORATED OR FIRST ORGANIZED: \_\_\_\_\_

PRESIDING OFFICER: \_\_\_\_\_

SECRETARY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

PHONE: \_\_\_\_\_

RAFFLE MANAGER: \_\_\_\_\_

RAFFLE MANAGER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

PHONE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

**CLASSIFICATION OF ORGANIZATION**

RELIGIOUS

FRATERNAL

CHARITABLE

EDUCATIONAL

LABOR

VETERANS

BUSINESS

YES  NO In the entire five (5) year period preceding this application, has the organization names above maintained a bona fide membership engaged in carrying out the organization's objectives?

**IF AN INDIVIDUAL, HAVE YOU EVER BEEN...**

YES  NO Convicted of a felony?

YES  NO A professional gambler or gambling promoter?

YES  NO Declared by someone else to not be of good moral character?

**IF A FIRM OR CORPORATION**, has anyone with a proprietary, equitable, or credit interest in your firm or corporation, or anyone active in or employed by your firm or corporation, ever been ...

YES  NO Convicted of a felony?

YES  NO A professional gambler or gambling promoter?

YES  NO Declared by someone else to not be of good moral character?

**IF AN ORGANIZATION**, has anyone who is an officer, director or employee, whether compensated or not, or anyone who is participating in the management or operation of this raffle, ever been...

YES  NO Convicted of a felony?

YES  NO A professional gambler or gambling promoter?

YES  NO Declared by someone else to not be of good moral character?

DATE OF THIS APPLICATION: \_\_\_\_\_

TOTAL VALUE OF MERCHANDISE TO BE AWARDED: \_\_\_\_\_

SINGLE VALUE OF MOST COSTLY PRIZE: \_\_\_\_\_

COST OF SINGLE CHANCE: \_\_\_\_\_

LOCATION(S) WITHIN THE CITY OF RED BUD WHERE CHANCES WILL BE SOLD OR ISSUED:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TIME PERIOD DURING WHICH CHANCES WILL BE SOLD OR ISSUED:

\_\_\_\_\_

\_\_\_\_\_

TIME PERIOD DURING WHICH WINNING CHANGED WILL BE DETERMINED:

\_\_\_\_\_

\_\_\_\_\_

WE, THE UNDERSIGNED, DO HEREBY ATTEST TO THE FOLLOWING:

That we are the Presiding Officer and Secretary of the Organization named herein, possessing full authority to submit this application, and attest that it is true, correct and complete; and

That the organization named herein classified by the State of Illinois as not-for-profit, that documentation of such has been submitted and is on file with the City of Red Bud, and that said documentation is current and accurate; and

That the Organization named herein has been in existence for at least five (5) year, that documentation of incorporation or initial organization has been submitted and is on file with the City of Red Bud, and that said documentation is current and accurate; and

That all persons participating in the management or operation of the raffles listed herein are members, volunteers or employees of the organization named herein, and that they will not receive any renumeration or any other compensation for their participation, either directly or indirectly from any source; and

That a copy of a Fidelity Bond in the sum of \$1,000.00 has been obtained by the Raffle Manager(s) named herein in favor of the Organization, that said Bond has been submitted to the City Clerk and is on file with the City of Red Bud, and that said Bond is current and accurate; and

That the organization named herein shall maintain records of each raffle as specified by Chapter 7, Article V of the City Code of Red Bud, and that all required reports shall be submitted to the City Clerk at 200 East Market Street, Red Bud, Illinois, by the first day of each month, and

That we have read, understand, and will abide by the provisions of Chapter 7, Article V, "Raffles" of the City of Red Bud and that the information contained in this application is true and correct to the best of our knowledge.

\_\_\_\_\_  
Signature of Presiding Officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Secretary

\_\_\_\_\_  
Date