

**APPLICATION FOR LICENSE
FOR THE CONDUCT OF RAFFLES
CITY OF SALEM, ILLINOIS**

1. Name and Address of Individual making Application: _____

2. Name and Address of Organization Applying for License: _____

3. Approximate number of members of the organization that reside in the city: _____

4. Length of existence of the organization: _____
(Must have been in existence at least 5 years.)
5. Name and Address of Raffle Manager: _____

6. Location(s) at which chances are to be sold or issued: _____

7. Indicate Type Raffle & Duration:
 - A. _____ **One Raffle to be conducted during a specified period and winning chances announced within 90 days.** (Fee - \$10.00 Each Raffle.) List time period during which raffle chances will be sold or issued: - Beginning Date _____ and Ending Date _____. List date of announcement of winning chances _____
 - B. _____ **Raffles with chances issued or sold and winning chances announced at the same location and on the same date.** (Fee - \$5. 00 Each Raffle.) List number of raffles to be conducted on each date_____. List dates of announcement of winning chances: _____

8. Maximum number of raffle chances to be sold: _____. Kind of Raffle _____
9. Location of announcement of winning chances: _____

10. Maximum Value of Prizes – (Not to exceed \$50,000.00) _____
11. Price charged for each raffle – (Not to exceed \$100.00) _____

Signature of Applicant _____

Dated _____

STATE OF ILLINOIS)
) SS.
COUNTY OF)

We, _____ and _____,
President and Secretary respectively of _____,
Do hereby certify that the _____,
Is a not-for-profit organization existing pursuant to the laws of the State of Illinois, and as such
not-for-profit organization is eligible as an applicant for a “License for the Conduct of Raffles”,
pursuant to Ordinance No. 87-6, Ordinance No. 2000-28 and Ordinance No. 2001-15 of the City
of Salem, Illinois.

Dated this _____ day of _____, 20____.

President

ATTEST:

Secretary

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Public