VILLAGE OF LOMBARD
RAFFLE REGISTRATION APPLICATION
255 E. Wilson Ave., Lombard IL 60148

1. Organization: __________________________________________________________
   Address: ______________________________________________________________
   Telephone: __________________ Email Address ______________________________

2. Date Organization created: ______________________________________________

3. Type of Organization operating the raffle: (check appropriate box)
   _____ Charitable _____ Fraternal _____ Religious _____ Labor _____ Business
   _____ Educational _____ Veterans _____ Other Not-For-Profit _____ Law Enforcement Agency
   _____ Statewide Association representing Law Enforcement Officials
   _____ Non-Profit Fundraising Organization organized to provide financial assistance to an individual or
   group of individuals suffering extreme financial hardship (please provide a brief description of the purpose of
   the organization, the name of the individual(s) that the organization is assisting and the illness, disability,
   accident or disaster causing an extreme financial hardship for said individual(s)
   ____________________________________________________________
   ____________________________________________________________

4. Where within the Village will the winning chance or chances be determined:
   ________________________________________________________________

5. Is the premises set forth in 4. above owned by the organization conducting the raffle: _____ Yes _____ No

6. If the answer to 5. above is “No”, please confirm that any payment by the organization conducting the raffle,
   for the use of the premises on which the winning chance or chances will be determined, will not be based on
   a percentage of receipts or profits from the raffle. (“X” here to confirm) _____ Yes _____ No

7.* Dates during which raffle tickets will be sold (Note: the time period may not exceed 365 days):
   ________________________________________________________________

8.* Date(s) winning chances will be determined: ________________________________

9.* List the proposed prizes: ________________________________________________

10. Has the organization, any employee of the organization; any person actively involved with the organization;
    any person acting as an officer or director of the organization; or any person owning a proprietary, equitable
    or credit interest in the organization ever been convicted of a felony? _____ Yes _____ No
    If yes, please explain: ________________________________________________

11. Is any employee of the organization; any person actively involved with the organization; any person acting as
    an officer or director of the organization; or any person owning a proprietary or equitable interest in the
    organization formerly or currently a professional gambler or professional gambling promoter? _____ Yes _____ No
12. Has the organization; any employee of the organization; any person actively involved with the organization; any person owning a proprietary, equitable or credit interest in the organization; or any person acting as an officer or director of the organization, ever been convicted of a violation of Chapter 123 of the Lombard Village Code, or the ordinance of any other municipality regulating gambling? If so, please state the name of the individual, the date of the violation, and identify the municipality whose ordinance was violated.

_____ Yes    _____ No

❖ If this application is for multiple raffles, please attach a separate sheet to provide the requested information for each proposed raffle.

13. Name of Raffles Manager:
   
   Address:
   
   Telephone:
   
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NOTICE
In accordance with Illinois Compiled Statutes, 230 ILCS 15/2(b), licenses shall be issued only to bona fide religious, charitable, labor, business, fraternal, educational, or veterans’ or other bona fide not-for-profit organizations that operate without profit to their members and which have been in existence continuously for a period of five (5) years immediately before making application for a license and which have during that entire five (5) year period been engaged in carrying out their objects, or to a non-profit fundraising organization that the Village of Lombard determines is organized for the sole purpose of providing financial assistance to an identified individual or group of individuals suffering extreme financial hardship as the result of illness, disability, accident or disaster, or to any law enforcement agencies and statewide associations that represent law enforcement officials. The aforementioned five (5) year requirement is waived for a bona fide religious, charitable, labor, business, fraternal, educational or veterans’ organization, if the organization is a local organization that is affiliated with and chartered by a national or State organization that meets the five (5) year requirement.

☐ I/WE, DO HEREBY DECLARE, UNDER OATH, THAT THE ORGANIZATION NAMED IN THIS APPLICATION IS A NOT-FOR-PROFIT ORGANIZATION (AS DEFINED IN ILLINOIS COMPILED STATUTES, 230 ILCS 15/2(b), WHICH HAS BEEN IN EXISTENCE FOR A MINIMUM PERIOD OF FIVE YEARS OR IS A LOCAL ORGANIZATION THAT IS AFFILIATED WITH AND CHARTERED BY A NATIONAL OR STATE ORGANIZATION THAT MEETS THE 5-YEAR REQUIREMENT. I/WE HEREBY STATE THAT I/WE HAVE READ CHAPTER 123 OF THE LOMBARD VILLAGE CODE AND ALL AMENDMENTS THERETO, AND WILL ABIDE BY THE RULES STATED THEREIN. OR

☐ I/WE, DO HEREBY DECLARE UNDER OATH, THAT THE ORGANIZATION NAMED IN THIS APPLICATION IS A NOT-FOR-PROFIT FUNDRAISING ORGANIZATION WITH THE SOLE PURPOSE OF PROVIDING FINANCIAL ASSISTANCE TO THE INDIVIDUAL OR GROUP OF INDIVIDUALS SET FORTH ABOVE, WHICH INDIVIDUAL OR GROUP OF INDIVIDUALS IS SUFFERING EXTREME FINANCIAL HARDSHIP AS A RESULT OF ILLNESS, DISABILITY, ACCIDENT OR DISASTER. I/WE HEREBY STATE THAT I/WE HAVE READ CHAPTER 123 OF THE LOMBARD VILLAGE CODE AND ALL AMENDMENTS THERETO, AND WILL ABIDE BY THE RULES STATED THEREIN. OR

☐ I/WE, DO HEREBY DECLARE UNDER OATH, THAT THE ORGANIZATION NAMED IN THIS APPLICATION IS A LAW ENFORCEMENT AGENCY OR A STATEWIDE ASSOCIATION THAT REPRESENTS LAW ENFORCEMENT OFFICIALS. I/WE HEREBY STATE THAT I/WE HAVE READ CHAPTER 123 OF THE LOMBARD VILLAGE CODE AND ALL AMENDMENTS THERETO, AND WILL ABIDE BY THE RULES STATED THEREIN.

______________________________
Presiding Officer of Corporation/Organization

______________________________
Secretary of Corporation/Organization

Print Name: ________________________________

Print Name: ________________________________
The raffles manager shall give a fidelity bond in an amount of two times the sum of prizes available in favor of the organization conditioned upon his/her honesty in the performance of his/her duties. Terms of the bond shall provide that notice shall be given in writing to the Village of Lombard not less than 30 days prior to its cancellation. The Village of Lombard may waive the bond requirements by including a waiver provision in the license issued to an organization under Chapter 123 of the Lombard Village Code, provided that a license containing such waiver provision shall be granted only by the affirmative vote of the requisite number of members of the licensed organization or, if the licensed organization does not have members, of members of the governing board of the organization, to constitute an affirmative action of the licensed organization.

**WAIVER**

I, ______________________________________________________________________, being the ______________________________________________________________________ of the corporation/organization applying for a raffle license, certify that by affirmative vote of the requisite number of members of the licensed organization or, if the licensed organization does not have members, of members of the governing board of the organization, to constitute an affirmative action of the licensed organization, the requirements of Section 123.05 of the Lombard Village Code, relative to the fidelity bond requirement for the raffles manager, have been waived.

By: __________________________________________

Print Name: ______________________________________________________________________

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**FEE**

1 to 3 raffles during a calendar year -- $5.00 per raffle

Number of raffles applied for: ___________

Fee accompanying this application: $___________

4 to 12 raffles during a calendar year -- $25.00

More than 12 raffles during a calendar year -- $50.00

Revised 02/10/2020
1. Organization: 

2. Name of person completing this form: 

3. Raffle License Number: 

4. Date of Raffle: 

5. Date of Report: 

6. Gross receipts of Raffle: 

7. Expenses of Raffle: 

8. Provide a detailed itemization of all expenses and attach all supporting documents for all expenses (attach separate sheets if necessary):

   
   
   
9. Net proceeds of Raffle: $

10. Provide a detailed itemization of the manner of distribution of the net proceeds including the payee, purpose, amount and date of payment (attach separate sheets if necessary):

   
   
   
11. Location of records relating to operation of raffle and times for public inspection:

   
   
   

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Signature  Date