## **BUREAU COUNTY ILLINOIS**

Matthew S. Eggers, Bureau County Clerk 700 S. Main St.; Princeton, IL 61356

815-875-2014 - www.bureaucountyclerk.gov - E-mail: countyclerk@bureaucounty-il.gov

## APPLICATION FOR LICENSE TO OPERATE A RAFFLE IN THE COUNTY OF BUREAU (Fee: \$25.00 made out to Bureau County Clerk) 1. Name of Organization \_\_\_\_\_ Date \_\_\_\_\_ 2. Organization Address \_\_\_\_\_\_ 3. Type of Organization: \_\_\_ Charitable \_\_\_ Religious \_\_\_ Educational \_\_\_ Veterans \_\_\_ Business \_\_\_ Hardship Situation \_\_\_ Other -- Please provide explanation for hardship or "other" situation: 4. Date when this group organized \_\_\_\_\_ -- If chartered or incorporated, date and place where papers were issued: 5. RESPONSIBLE MEMBERS: Presiding Officer (Printed Name) Presiding Officer (Signature) Date Address - Street, City, State, Zip E-Mail Phone Secretary (Printed Name) Secretary (Signature) Date Address - Street, City, State, Zip E-Mail Phone Raffle Manager (Printed Name) Raffle Manager (Signature) Date Address - Street, City, State, Zip E-Mail Phone

Date submitted for approval: \_\_\_\_\_\_ Date approved: \_\_\_\_\_\_by: (County Clerk) \_\_\_\_\_

## 6. ATTESTATION:

The undersigned attest that the aforementioned organization operates without profit to their members and has been in existence continuously for a period of (5) years or more as of the date of this application and has, during that entire five (5) year period, been engaged in carrying out their objectives and is considered not-for-profit under the laws of the State of Illinois **OR** is an organization requesting approval for license by the Bureau County Clerk that is organized for the sole purpose of providing financial assistance to an identified individual or group of individuals suffering extreme financial hardship as a result of an illness, disability, accident, or disaster.

The undersigned hereby states under penalty of perjury that all statements in the foregoing application are true and correct and that the officers, operators, manager, and workers of the games are bona fide members of the sponsoring organization and are all of good moral character, have not been convicted of a felony that would impair the person's ability to engage in the licensed position and meet the requirements as set forth by the State of Illinois and Bureau County to the best of our understanding, and are not nor have ever been a professional gambler or a professional gambling promoter.

The undersigned also acknowledges that if a raffle/poker run license is granted, the undersigned will be responsible for the conduct of the games in accordance with the laws of the State of Illinois and the Bureau County Raffle/Poker Run Ordinance (2021).

Presiding Officer's Signature (must be notarized)	Secretary's Signature (must be notarized)		
Notary:  Commission expires:  Notary Seal	Notary:  Commission expires:  Notary Seal		
7. Estimated aggrégate retail value of all prizes:			
8. Maximum retail value of each prize awarded:			
9. Maximum price charged for each ticket:			
10. Time period when tickets/chances will be sold:			
11. General area of sales:			
12. Maximum number of days for ticket sales:			
13. Date/Time/Location winning tickets will be drawn:			
RAFFLE MAI	NAGER BONDING		
A <b>Fidelity Bond</b> must be given by the raffle manager, and to Organizations my request a <b>bond waiver</b> , with a confirmatorganization does not have members, of members of the graphs 15/5)	ive vote of the members of the organization or, if the		
Bond Status:			
Attached			
Requesting Waiver: Requires an affirmative vote in	support of waiver by members of the organization or governi		
board conducting the raffle. Date of affirmative vo	te:		

## **BUREAU COUNTY RAFFLE LICENSE PRIZE PAYMENT REPORT**

This report is required to be filed with the *Bureau County Clerk's Office* and with your organization once the raffle has concluded (*Per ILCS 15/6 Raffles and Poker Runs Act*). You may not renew your license for this raffle until this form is completed and turned in to the County Clerk. The report may be brought into the County Clerk's Office in person or mailed or emailed. *Records must be kept for 3 years.* 

The person who accounts for gross receipts, expenses, and net proceeds from the operation of raffles shall not be the same person who accounts for other revenues of the organization.

Today's Date:	Raffle I	icense Number:			
Name of Organization:			·		
A. Gross Receipts (Total amount from ticket sales):			\$		
B. Expenses (Attach separate sheets if no	eeded):				
(Do not include the cost of raffle prize	es reported in item	D)			
Description of Item/Service Pur	Purpose		Amo	unt	
			ware.	\$	
No. of the Control of				\$	
		A		\$	
				\$	
Total Expenses:					
C. Net Proceeds (Subtract total expenses from gross receipts):		\$			
D. Distribution of Prizes (Attach separate sheets if need Payee/Prize Winner		Date Paid	Amount		
				\$	
				\$	
				\$	
			·	\$	
Total Distribution of Prizes Awarded	:		\$	, , , , , , , , , , , , , , , , , , ,	
I hereby affirm that the above infor	mation is true and co	orrect to the best	of my knowle	dge.	
Raffle Manager or Presiding Officer	's Signature	Date			
Mail: Matthew S. Eggers Bureau County Clerk		Email: <a href="mailto:countyclerk@bureaucounty-il.gov">countyclerk@bureaucounty-il.gov</a> Website: <a href="mailto:www.bureaucountyclerk.gov">www.bureaucountyclerk.gov</a>			
700 South Main Street. Ro	om 400				

Princeton, IL 61356