



100 Parkers Mill, Oswego, IL 60543
 630-554-3259 • Fax: 630-554-3306
 registration@oswegoil.org
 Website: http://www.oswegoil.org

VILLAGE OF OSWEGO RAFFLE LICENSE APPLICATION

Must submit with application (no later than 14 business days prior to start of all raffle sales):

Application Bond Fees

Organization Name: _____

Organization Address: _____

Mailing Address (if different from above): _____

Type of Organization: Religious Charitable Labor
 Fraternal Educational Veterans Community Association
 Non-profit Fundraising Organization Voluntary Organization _____

Length of Time Organization has been in Existence: _____

Place and Date of Corporation's Charter, if Applicable:

Place: _____ Date: _____

Date of Raffle Drawing: _____

Location of Raffle Drawing: _____

Area(s) in which Raffle Tickets will be sold _____

Date of ticket sales _____ to _____ Ticket price _____
 (Not to exceed one year; with raffle drawing on or before the 365th day)

List prizes to be awarded and retail value of each:

PRIZE	RETAIL VALUE
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL AGGREGATE VALUE OF ALL PRIZES	\$ _____

***** OFFICE USE ONLY *****

Approved Not Approved
 Fidelity Bond / Waiver

Raffle License No.: _____
 Final Report

Date of Issuance: _____
 Payment Received: \$ _____

President/Chairperson's Name: _____

Address: _____ Date of Birth: _____

Phone No. _____ Email Address: _____

Secretary's Name (if applicable): _____

Address: _____ Date of Birth: _____

Phone No. _____ Email Address: _____

Raffle Manager's Name: _____

Address: _____ Date of Birth: _____

Phone No. _____ Email Address: _____

At the time the application is submitted, a manager shall give a **fidelity bond** in the sum of the aggregate retail value of the prizes as set out on the application. The bond shall be in favor of the organization conditioned upon the raffle manager's honesty in the performance of his duties. The bond shall provide that notice shall be given in writing to the licensing authority not less than thirty (30) days prior to its cancellation period. If the retail value of the prizes exceeds fifteen thousand dollars (\$15,000), the bond shall be a corporate surety.

The undersigned hereby attests that the above-named applicant is registered as a not-for-profit organization under the law of the State of Illinois and has been continuously in existence for five (5) years preceding this application and, that during this five (5) year period preceding date of application, it has maintained a bona fide membership actively engaged in carrying out its objectives. The undersigned does hereby state under penalties of perjury that all statements in the foregoing application are true and correct; that the officers, operators and workers of the raffle are bona fine members of the sponsoring organization and are all of good moral character and have not been convicted of a felony; that if a license is granted hereunder, the undersigned will be responsible for the conduct of the raffle in accordance with the provisions of the laws of the State of Illinois and this jurisdiction governing the conduct of such raffle.

The undersigned hereby attest that all statements made herein are true and correct to the best of our knowledge. The undersigned certify that they have read Title 3, Chapter 4 of the Village of Oswego Code. The Raffle Report will be returned within 30 business days from the conclusion of the raffle.

All officers must sign below:

Applicant

President/Chairman

Secretary

Raffle Manager

Fee Schedule is as follows:

AGGREGATE PRIZE VALUE

Less than \$500.00No License Required
\$501.00 to \$5,000.00\$ 5.00
\$5,001.00 and over\$ 25.00

Please allow 7-10 business days for processing and approval of the submitted application.



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VILLAGE OF OSWEGO RAFFLE REPORT

Organization Name: _____

Address: _____

Phone No. _____ Email Address: _____

Date of Raffle Drawing: _____

Gross Receipts	\$	
Expenses	-	\$
Net Proceeds	=	\$

Distribution of Net Proceeds		
Winner / Payee name and address	Distribution Date	Item / Amount

Treasurer's Name: _____

Address: _____

Phone No. _____ Email Address: _____

I declare the raffle report has been examined by me, and to the best of my knowledge, is a true, correct and complete report as required by 230 ILCS 15/8.1 of the State of Illinois Raffles Act.

 Signature of Treasurer

 Date

Please return Raffle Report form within 30 business days from conclusion of raffle to:
 Village of Oswego, Attn: Village Clerk, 100 Parkers Mill, Oswego, IL 60543

REQUEST FOR WAIVER OF RAFFLE MANAGER'S BOND

The undersigned, being duly sworn, deposes and says that he/she is:

_____ representing _____
(President/Secretary) (Organization)

And further states that the aforementioned members of the organization have voted unanimously to waive the raffles manager bond.

(President Signature)

(Date)

(Secretary Signature)

(Date)

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

(Notary Public)

(Village Signature)

(Date License Granted)