



RAFFLE LICENSE APPLICATION

1400 Mt. Zion Parkway
Mt. Zion, IL 62549
Phone: 217.864.5424
Fax: 217.864.5935

Application is hereby made to operate a raffle under the regulations of the Village of Mt. Zion Ordinance to License and Regulate Raffles.

LICENSE(S) REQUESTED:

- ☐ SINGLE ONE-DAY RAFFLE(S) (1 or 2 Raffles) - \$30.00
- ☐ SINGLE ROLLING MULTI-DAY RAFFLE - \$30.00
- ☐ MULTIPLE ONE-DAY RAFFLES (3 or more Raffles) \$15.00 per Raffle or \$75.00 (maximum)

NAME OF ORGANIZATION _____

MAILING ADDRESS _____

TELEPHONE NUMBER _____

This organization was established on _____ and has been in existence continuously since that time with a bonafide membership engaged in carrying out its objectives.

DESIGNATED RAFFLE MANAGER

NAME _____

ADDRESS _____

TELEPHONE _____

RAFFLE MANAGER'S BOND

- ☐ Fidelity Bond in the amount of \$_____ attached.
- ☐ Waiver of bond requested. (Attach sworn statement attesting to the unanimous vote of the members as required.)

OPERATION OF RAFFLE

The area in which raffle chances will be sold or issued within the Village of Mt. Zion which is under the jurisdiction of the Ordinance as of this date will be:

(List the unincorporated areas of Macon County and/or the name of any incorporated city, town, or village in which raffle chances are proposed to be sold or issued. State Law requires a separate raffle license for every municipality or county for which raffle tickets will be sold.)

The time period during which raffle chances will be sold or issued will be from _____, 20____, through _____, 20____, both inclusive. (One year maximum)

The determination of the winning chances will be held on _____, 20____, at _____ (exact location)

The price charged for each raffle chance sold or issued will be \$_____.

**IF REQUESTING MULTIPLE LICENSES _____ LIST DATES BELOW:
Licenses

LIST OF ALL RAFFLES INCLUDING PRIZES OR MERCHANDISE TO BE AWARDED

PRIZE OR MERCHANDISE	EST. RETAIL VALUE
1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____
7. _____	\$ _____
8. _____	\$ _____
9. _____	\$ _____
10. _____	\$ _____
11. _____	\$ _____
12. _____	\$ _____
13. _____	\$ _____
14. _____	\$ _____
15. _____	\$ _____
AGGREGATE RETAIL VALUE OF ALL PRIZES OR MERCHANDISE	\$ _____

Attach separate page if necessary to list all prizes or merchandise.

We, _____ the presiding officer and

_____ the secretary of the

(exact name of applicant organization)

being duly sworn, hereby attest that the aforesaid organization is a non-profit (check one only)

☐ Charitable ☐ Religious ☐ Veterans ☐ Business

☐ Educational ☐ Fraternal ☐ Labor ☐ Hardship

Organization as defined in the Village of Mt. Zion Ordinance to License and Regulate Raffles;
that we have received a copy of such Ordinance and that the raffle for which this application is
made will be operated in accordance with all the provisions thereof; and that the organization is
eligible for a license of said Ordinance. We further attest that all statements and answers to
questions in the foregoing application are made in full and are true and correct in every respect.

(signature, Presiding Officer)

Date _____

(signature, Secretary)

Date _____

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

Notary Public

REQUEST FOR WAIVER OF RAFFLE MANAGER'S BOND

The _____
(exact name of applicant organization)

hereby requests that the Village of Mt. Zion waive the requirement for the Raffle Manager's Bond in connection with the raffle for which the attached application is made. We, the undersigned, being the Presiding Officer and the Secretary of the aforesaid organization, do hereby attest to the fact that, by unanimous vote, the members of said organization have requested and agreed to such waiver.

Presiding Officer

Date _____

Secretary

Date _____

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

Notary Public

FIDELITY BOND

KNOW ALL MEN BY THESE PRESENTS, That we _____,
the Raffle Manager as principal, and _____ and
_____ as sureties, held and firmly bound to
_____ (organization conducting raffle)
in the sum of \$_____, lawful money of the United States, a sum equal to the
aggregate retail value of all prizes or merchandise to be awarded in said raffle, for the
payment of which, well and truly to be made, we do bind ourselves, and each of us, our heirs,
executors and administrators, and each of them, jointly, severally, and firmly by these
presents.

Signed with our hands and sealed with our seals, this _____ day of
_____, 20_____.

THE CONDITION OF THIS OBLIGATION IS SUCH THAT, whereas, the said
principal, _____, has been duly designated as raffle manager
by _____ (organization conducting raffle)
in the Village of Mt. Zion, State of Illinois.

NOW, THEREFORE, If _____, the said principal and
raffle manager, abides by the condition of this fidelity bond, honestly performs the duties of
raffle manager, and faithfully observes the provisions of the Village of Mt. Zion Ordinance to
License and Regulate Raffles and all laws of the State of Illinois and the United States of
America applying to raffles to the best of his skill and ability, then this obligation shall be null and
void; otherwise, it shall remain in full force and effect. Notice shall be given in writing to the
Village of Mt. Zion not less than thirty (30) days prior to the cancellation of this bond.

In witness, the principal and sureties have executed this instrument on this _____ day of
_____, 20_____.

By: _____ (Raffle Manager)

By: _____ (Surety)

By: _____ (Surety)

STATE OF ILLINOIS)
)
COUNTY OF MACON)

I, _____ Notary Public in and for the County
and State, do hereby certify that _____ (raffle manager),
_____ (surety) and _____ (surety)
who are each personally known to me to be the same persons whose names are subscribed to
in the foregoing document, appeared before me this day in person and acknowledged that they
signed, sealed, and delivered said instrument as their free and voluntary act, for the uses and
purposes as therein set forth.

GIVEN under my hand and seal, this _____ day of _____, 20_____.

Notary Public