

City of Prophetstown  
339 Washington Street

Application for Raffle License

Part I (Please print)

Fee: \$5.00

1. Name of Organization \_\_\_\_\_
2. Address \_\_\_\_\_
3. Type of Organization \_\_\_\_\_
4. Is your Organization incorporated? \_\_\_\_\_ Date \_\_\_\_\_
5. Members responsible for the conduct and operation of raffle:

Raffle Manager \_\_\_\_\_

Address \_\_\_\_\_

Telephone # \_\_\_\_\_

Raffle Manager \_\_\_\_\_

Address \_\_\_\_\_

Telephone # \_\_\_\_\_

List name, address, telephone #, and date of birth of any other members responsible for the conduct of operation of raffle:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Have any of the individuals in #5 ever been convicted of a felony? \_\_\_\_\_

Part II

7. Purpose of raffle \_\_\_\_\_
8. Aggregate retail value of all prizes to be awarded \_\_\_\_\_
9. Maximum retail value of each prize to be awarded \_\_\_\_\_
10. Maximum price charges for each raffle chance to be issued or sold \_\_\_\_\_
11. Maximum number of raffle chance to be issued \_\_\_\_\_
12. Area or areas in which raffle chances will be sole or issued \_\_\_\_\_
13. Time period during which raffle chances will be sold or issued \_\_\_\_\_
14. Date, time, and location at which winning chances will be determined \_\_\_\_\_

15. Will anyone associated with the operation of conducting of this raffle profit or receive personal gain therefrom?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

16. Identify where the required records (e.g. receipts, expenses, etc.) will be maintained \_\_\_\_\_

\_\_\_\_\_

Part III

The organization applying for a raffle license is an organization that operates without profit to its members and which has been in existence continuously since \_\_\_\_\_ before making this application for a license and which has had during the preceding year been a bona fide membership engaged in carrying out these objectives.

The applicant states that the organization has met all qualifications to conduct a raffle and authorizes the City Clerk or his/her agent to obtain any and all records to verify the statements in this application. Further, the applicant acknowledges that any false statements on the application shall result in the rejection of the application, and/or prosecution under the criminal laws of this City.

Dated this \_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Presiding Officer

\_\_\_\_\_  
Secretary

Presiding Officer, being duly sworn upon his/her oath, states that he/she has read the above foregoing application and also Sec. 10-120 of the City of Prophetstown Code of Ordinance regarding Raffles, and knows and attests to the contents thereof.

Subscribed and sworn to before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Notary Public

FOR CITY CLERK’S USE ONLY. The recommendation and/or approval of this application is based solely upon the information contained herein and any false statements on the application shall result in the revocation of applicant’s license and/or prosecution under the criminal laws of this state or ordinances of this City.

RECOMMENDATION:        \_\_\_\_\_Approval        \_\_\_\_\_Denial

Dated this \_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Mayor

\_\_\_\_\_  
City Clerk