

City of Wheaton, Illinois

City Clerk's Office 303 W. Wesley Street P.O. Box 727 Wheaton, IL 60187-0727 630-260-2019; fax 630-260-2017

www.wheaton.il.us

Raffle License Application

In accordance with the Illinois Compiled Statutes (1992, 230 *ILCS* 15/1) and the provisions of the Wheaton City Code, raffle licenses shall be issued only to bona fide religious, charitable, labor, business, fraternal, educational or veterans organizations which operate without profit to their members, and which have been in existence continuously for a period of no less than five (5) years immediately before making application for a license and which had, during that entire five (5) year period, a bona fide membership engaged in carrying out its objectives.

All applicants for licenses must have their principal place of business within Milton Township unless otherwise allowed by the Wheaton City Council. Each license issued is valid for one (1) raffle only, with such raffle drawing taking place on a single day only as specified on this application; there shall be no roll-over/carry-over of a raffle prize(s)/merchandise. No more than two (2) raffle licenses shall be issued during any twelve (12) month period to any Applicant with the same name, or collectively to one or more organizations with different names sharing any common officer(s) or director(s).

No less than fifty-five percent (55%) of the raffle proceeds shall be delivered to the charitable beneficiary.

(Please type or print)

1.	Organization DuPage County Historical Museum Foundation Address 102 E. Wesley Street, Wheaton, Illinois 60187	
	Phone <u>630-510-4986</u>	
2.	Type of Organization Non-Profit, 501c3	
3.	Date Organization was Formed 2005	
4.	Briefly explain what funds will be used for:	
	The funds raised from the raffle will be utilized towards new exhibits, education program development, and artifact restoration at DuPage County Historical Museum.	
5.	Locations where raffle chances/tickets will be sold: 102 E. Wesley, Wheaton, Illinois 60187	
6.	Date(s) on which raffle chances/tickets will be sold (Maximum 90 days prior to raffle drawing event): From 3/7/2015 to 3/7/2015	
7.	Date, time and location for determination of winning chance/ticket Date 3/7/2015 Time 9:30p.m.	
	Location DuPage County Historical Museum, 102 F. Wesley Street, Wheaton, IL 60187	

BOND WAIVER REQUEST

(Must be Completed through Signature Line and Notarized)

I, the undersigned, Secretary of <u>DuPage County</u>	Historical Museum Foundation
certify that a vote was held on	
and by a unanimous decision, the members of the	ne above-named organization granted a waiver
of the fidelity bond requirements in accordance	with Section 10-197 of the Wheaton City Code.
	Secretary of Organization
Subscribed and Sworn to before me this day of, 20	
Notary Public	
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\$25.00 Application Fee Received:	
Approved By:(City Manager or Designee)	
Date:	



FIDELITY BOND

Know All Men By These Presents:

That we, Wheaton Park District, of the City of Wheaton, State of Illinois, as Principal, and the PARK DISTRICT RISK MANAGEMENT AGENCY, an entity duly organized under the statutes of the State of Illinois, as surety, are held and firmly bound unto the City of Wheaton, Obligee, in the penal sum of Five Thousand and No/100 ———— DOLLARS (\$5,000.00) lawful money of the United States, to be paid to the said Obligee, for which payment well and truly to be made, we bind ourselves and our legal representatives, jointly and severally by these presents.

THE CONDITION OF THE ABOVE OBLIGATES the guarantor to pay a third party upon default by the applicant in the performance of any duty the applicant owes to any third party.

NOW THEREFORE, if the said Principal shall faithfully perform the duties and in all things comply with the laws and ordinances, including all Amendments thereto, appertaining to the license or permit applied for, then this obligation to be void, otherwise to remain in full force and effect until <u>12/30/15</u> unless renewed by Continuation Certificate.

This bond may be terminated at any time by the Surety upon sending notice in writing; by certified mail, to the clerk of the Political Subdivision with whom this bond is filed and to the Principal, addressed to them at the Political Subdivision named herein, and at the expiration of thirty-five (35) days from the mailing of said notice, this bond shall ipso facto terminate and the surety shall thereupon be relieved from any liability for any acts or omissions of the Principal subsequent to said date.

Dated this <u>13th</u> day of <u>February</u>, <u>2015</u>

Princ	ipal	
PARK	DISTRICT RISK MANAGEMENT	AGENCY
BY	1 Spett Jan	

POWER OF ATTORNEY

Know All Men By These Presents, that the PARK DISTRICT RISK MANAGEMENT AGENCY, an entity duly organized under the laws of the State of Illinois, and having its principal office in the City of Lisle, County of DuPage, State of Illinois, hath made, constituted and appointed and does by those presents make, constitute and appoint

Brett Davis

of Village of Lisle and State of Illinois its true and lawful Attorney-in-Fact, with full power and authority hereby confided in its name, place and stead, to sign, execute, acknowledge and deliver in its behalf as surety:

Any or all bonds or undertakings provided that no bond or undertaking executed under this authority shall exceed in amount the sum of Five Thousand Dollars (\$5,000.00)

and to bind the PARK DISTRICT RISK MANAGEMENT AGENCY thereby as fully end to the same extent as if such bond or undertaking was signed by the duly authorized officers of the PARK DISTRICT RISK MANAGEMENT AGENCY, and all the acts of said Attorney, pursuant to the authority herein given, are hereby ratified and confirmed.

This Power of Attorney is made and executed pursuant to and by authority of the following By-Laws adopted by the Board of Directors of the PARK DISTRICT RISK MANAGEMENT AGENCY.

ARTICLE VII. (a) 1. - The Chief Executive Officer may sign, with such other person authorized by the Board of Directors, any instruments which the Board of Directors have authorized to be executed and, in general perform all duties incident to the office of Chief Executive Officer and such other duties as may be prescribed by the Board of Directors from time to time.

In Witness Whereof, the PARK DISTRICT RISK MANAGEMENT AGENCY has caused these presents to be signed by its Chief Executive Officer, and its corporate seal to be hereto affixed, this _____13th_day of February, 2015

PARK DIS	TRICT RISK MANA	AGEMENT AGENCY
Ву:	Dut	Sam

STATE OF ILLINOIS COUNTY OF DUPAGE

13th day of February, 2015 before me appeared Brett Davis, to me personally known, who being by me duly sworn did say that he is the Chief Executive Officer of the PARK DISTRICT RISK MANAGEMENT AGENCY, the corporation described in the foregoing instrument, and that the Seal affixed to the said instrument is the Corporate Seal of the Said Corporation and that the said instrument was signed and sealed in behalf of said Corporation by authority of its Board of Directors.

In Testimony Whereof, I have hereunto set my hand and affixed my Official Seal, at the City of Lisle, Illinois the day and year first above written. Jan B. Bretusis

OFFICIAL SEAL JOAN B BALTUSIS NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:03/31/17

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#### STATE OF ILLINOIS **COUNTY OF DU PAGE**

I, Brett Davis, Chief Executive Officer of the PARK DISTRICT RISK MANAGEMENT AGENCY. do hereby certify that the above and foregoing is a true and correct copy of the POWER OF ATTORNEY, executed by said PARK DISTRICT RISK MANAGEMENT AGENCY, which is still in force and effect.

In Witness Whereof, I have hereunto set my hand and affixed the seal of the Corporation, on this 13<sup>th</sup> day of February, 2015.

| This power of attorney expires | 30* of December, 2015 |
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