

Original Raffle License Application

Please Type or Print Clearly

1. Organization Name Valley Aero Modelers		3. License Type Desired (check one) - Definition on Reverse Side <input type="checkbox"/> Class A <input checked="" type="checkbox"/> Class B	
2. Organization Mailing Address 1201 W Elsie St <div style="display: flex; justify-content: space-between;"> City ZIP Code County </div> Appleton , WI 54914 Outagamie		4. Organization Type (check one) - Definition on Reverse Side <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Religious <input type="checkbox"/> Fraternal </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Charitable <input type="checkbox"/> Veteran </div> <input checked="" type="checkbox"/> Service <input type="checkbox"/> Organizations to Whom Contributions are Tax Deductible (Submit Copy of IRS Letter of Determination, 501(c)(3))	
5. Date Organized or Chartered (mm/dd/ccyy) / /			
6. Describe the Community Activities in Which Your Organization has Participated. Attach a separate sheet if necessary. The benefit, the growth and the general welfare of the community			
<input type="checkbox"/> Check box if mail should go to Designated Member's mailing address			
7. Name of Designated Member Responsible for Raffle Events Heath Bartel Address 1201 W Elsie St <div style="display: flex; justify-content: space-between;"> City State ZIP Code </div> Appleton , WI 54914		8. Signature of Designated Member Assuming Responsibility for Lawful Conduct of Raffles Under Ch.563, Wis. Stats. <hr/> <div style="display: flex; justify-content: space-between;"> Signature Date(mm/dd/ccyy) </div> <div style="display: flex; justify-content: space-between;"> <div> Daytime Phone Number & EXT (920) 659-0826 </div> <div> Alternate Phone Number () </div> </div>	
9. Email Address			
10. Name of an Officer of the Organization Other Than the Person in #7 Tim Miller		<div style="display: flex; justify-content: space-between;"> <div> Daytime Phone Number & EXT () </div> <div> Alternate Phone Number () </div> </div>	
Check List - Please Review, Complete and Attach These Items Prior to Final Submission.		Do Not Write In This Space	
<input type="checkbox"/> Review the definitions on the reverse side of the application to verify correct responses. <input type="checkbox"/> Review all sections to ensure answers have been provided and sign the application. <input type="checkbox"/> Submit the organization's complete Articles of Incorporation and Bylaws, Constitution and/or Charter – <u>see reverse side</u> for Special Documentation Requirements. <input type="checkbox"/> If contributions to the organization are tax deductible, submit the Internal Revenue Service, 501(c)(3), Letter of Determination. <input type="checkbox"/> Enclose \$25 check or money order payable to: Department of Administration-Gaming (Payment <u>Must</u> Accompany Application – DO NOT FAX)			
<p align="center">Please allow 4 weeks for evaluation.</p> <p align="center">NOTE: Incomplete applications will be returned.</p>			

This document can be made available in alternate formats to individuals with disabilities upon request.

An organization conducting both Class A **and** Class B raffles must obtain a license for each type of raffle. Please submit a separate application and fee for each class of license desired to the Office of Charitable Gaming. This application may be reproduced. Do not collate or staple multiple applications into one.

See Reverse Side of Application for Definitions

Application Definitions

License Type

Class A Raffle License

The license type required to conduct a raffle in which some or all of the tickets for that raffle are sold on days other than the same day as the raffle drawing.

Class B Raffle License

The license type required to conduct a raffle in which all of the tickets for that raffle are sold on the same day as the raffle drawing.

A Local Organization that is:

Religious	An established religious institution or group thereof. If not, additional background information is requested.
Veteran	An established group of past participants in the United States Armed Forces. If not, additional background information is requested.
Fraternal	An organization with a representative form of government that (1) operates under the lodge system with a ritualistic form of work; (2) is organized to promote the payment of life, sickness, accident or other insurance benefits to its members; and (3) is organized to carry on some worthy civic or service purpose.
Service	An organization which has, as a minimum, the benefit, the growth and the general welfare of the community as one of its principle purposes. You will need to provide proof of service to the community. This category includes a labor organization or county political party, but excludes a trade association, a social club, a political action committee or any candidate's campaign.
Charitable	Provide copy of Charitable Certificate of Registration issued from the State of Wisconsin.
501(c)(3)	Internal Revenue Service 501(c)(3) Determination Letter stating that contributions to your organization are deductible for income tax purposes.

Special Documentation Requirements: Provide all supporting documents listed on check list held by your organization.

Your documentation requested on the check list needs to include a clearly defined purpose statement of what your group does and who you provide support to; and a dissolution clause, what will happen to your remaining assets if/when your group were to/does disband. You may be required to provide more information if your documentation is unclear.

Schools	Provide letter from the school district or principal authorizing raffle fundraising and allowing of minors to participate (this does NOT include PTA's, PTO's, or other groups associated with but not part of a school).
Colleges	Provide letter from a school administrator acknowledging sub group as part of the parent institution, this does not include fraternities.
Churches	If you are unable to locate the documents on page 1 in the check list, provide current worship bulletin.
Snowmobile/ATV Clubs	Provide a letter from a county official showing proof of construction and maintenance of trails for public use and the documentation listed on page 1 in the check list.

Qualified Organizations must be "local" as defined in Ch.563.907, Wis. Stats.: (2) "Local organization" means an organization whose activities are limited to this state or to a specific geographical area within this state; and, as required in Ch.563.907, Wis. Stats., must be in existence for at least one year immediately preceding its application or belong to a state or national organization that has been in existence for at least three years.