



CITY OF LACONIA
APPLICATION FOR RAFFLE LICENSE

(PLEASE PRINT OR TYPE)

Name of charitable organization conducting raffle: Laconia Kidz and Club

Organization's Address: P.O. Box 757, Laconia, NH 03247

Applicant's Name: William Gile Telephone # [REDACTED]

Applicant's Address: [REDACTED]

E-mail Address: [REDACTED]

Date of drawing: June 18, 2022 Non-Profit ID# 02-0486720

Prize(s) to be awarded: \$250 in Lottery Scratch Tickets

Copy of evidence of tax exemption attached: yes no

SWORN CERTIFICATE

As a duly authorized officer of the above named organization, I attest that this organization is exempt from Federal Income Taxation. I further certify that the proceeds of this raffle will be used for:

Charity Donations to Lakes Region Youth Programs and Non-Profits

** A copy of official printed ticket attached. **

(name/printed) _____
(name/signature)

Subscribed before me this _____ day of _____

Notary Public/Justice of the Peace

(FOR CITY USE ONLY)

Application Fee: 10- Received on (date): 4/18/23 By: WJG

Licensing Board Approval on: _____ License Valid: _____

Insurance Certificate Attached: yes no

Special Conditions of Approval: _____