

## STEPHENSON COUNTY POKER RUN LICENSE APPLICATION

c/o Stephenson County Clerk  
50 West Douglas Street ~ Suite 500  
Freeport, IL 61032  
815-235-8289

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### POKER RUN LICENSES ARE IN EFFECT FOR 1-YEAR FROM THE DATE ISSUED WITHOUT LIMIT TO THE NUMBER OF RUNS

APPLICATIONS WILL NOT BE ACCEPTED WITHOUT THE FOLLOWING:

- A COPY OF THE MANAGER'S BOND OR A COPY OF YOUR ORGANIZATIONS MINUTES NOTING A UNANIMOUS VOTE OF THE MEMBERS TO WAIVE THE MANAGER'S BOND REQUIREMENT.
- A CHECK FOR \$25.00 MADE PAYABLE TO THE STEPHENSON COUNTY CLERK.

YOUR APPLICATION WILL BE APPROVED WITHIN 20 DAYS AND YOUR LICENSE WILL BE MAILED TO YOUR RAFFLE MANAGER.

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(1) Each organization licensed to conduct poker runs shall keep records of its gross receipts, expenses and net proceeds for each single gathering or occasion at which winning hands or scores in a poker run are determined. All deductions from the gross receipts for each single gathering or occasion shall be documented with receipts or other records indicating the amount, a description of the purchased item or service or other reason for the deduction, and the recipient. The distribution of net proceeds shall be itemized as to payee, purpose, amount and date of payment.

(2) Gross receipts from the operation of poker runs shall be segregated from other revenues of the organization, including bingo gross receipts, if bingo games are also conducted by the same non-profit organization pursuant to license therefore issued by the Department of Revenue of the State of Illinois, and placed in a separate account. Each organization shall have separate records of its poker runs. The person who accounts for the gross receipts, expenses, and net proceeds from the operation of poker runs shall not be the same person who accounts for other revenues of the organization.

(3) Each organization licensed to conduct poker runs shall report to its membership, and to the County Clerk of Stephenson County, Illinois, its gross receipts, expenses and net proceeds from poker runs, and the distribution of net proceeds itemized as required by Law.

(4) Records required by this Section shall be preserved for three (3) years, and the organization shall make available their records relating to operation of poker runs for public inspection at reasonable times and places.

(5) The County shall maintain the records required by this Section in compliance with the "Raffles and Poker Runs Act" and the Local Records Act, 50 ILCS 205/1 *et seq.*

(6) If this application covers more than one poker run, the locations required to be listed herein need not be listed in this application but must be provided to the County Clerk prior to each poker run. The locations of the first poker run must be listed in this application.

**FOR OFFICE USE ONLY:**

Date of Application: \_\_\_\_\_

Fee: \_\_\_\_\_

APPROVED: \_\_\_\_\_ DISAPPROVED: \_\_\_\_\_

Date License Expires: \_\_\_\_\_

The name and address of the applicant/organization:

Name of Organization \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Street City Zip

The type of organization that is conducting poker run, *i.e.*, religious, charitable, labor, fraternal, educational, veterans or other:

Type of Organization \_\_\_\_\_

The length of existence of the organization and, if incorporated, the date and state of incorporation: How long has organization been in existence? \_\_\_\_\_

7. Place and date of incorporation:

\_\_\_\_\_ Place Date

The name, address, telephone number, and date of birth of the organization's presiding officer, secretary and poker run manager:

1. Name and title \_\_\_\_\_

Mailing address \_\_\_\_\_  
Street City Zip

2. Name and title \_\_\_\_\_

Mailing address \_\_\_\_\_  
Street City Zip

3. Name of Manager \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Street City Zip

The name and address of locations at which each poker run will be conducted. Fill out a separate list of locations for each poker run covered by this application. In the event a specified poker run covers locations determined by the participant, only the starting location, key location and any location where winning chances will be determined need be listed.

1. Name, address \_\_\_\_\_

2. Name, address \_\_\_\_\_

3. Name, address \_\_\_\_\_

4. Name, address \_\_\_\_\_

The time period during which the poker run or runs will be conducted (no longer that one year):

From \_\_\_\_\_ To \_\_\_\_\_

The time of determination of winning chances and the location or locations at which the winning chances will be determined:

- 1. Time and location \_\_\_\_\_
- 2. Time and location \_\_\_\_\_
- 3. Time and location \_\_\_\_\_

A sworn statement attesting to the not-for-profit character of the prospective licensee organization signed by the presiding officer and the secretary of that organization; and attesting to the fact that the information contained in the application is true and correct.

“The undersigned attest that the above-named organization is organized not-for-profit under the law of the State of Illinois and has been in existence for 5 years, preceding date of this application, and that during this entire 5-year period preceding date of application it has maintained a bona fide membership actively engaged in carrying out its objectives. The undersigned do hereby state under penalties of perjury that all statements in the foregoing application are true and correct; that if a license is granted hereunder, the undersigned will be responsible for the conduct of the games in accordance with the provisions of the laws of the State of Illinois and this jurisdiction governing the conduct of such games.”

Name of Organization \_\_\_\_\_

Signature of Presiding Officer \_\_\_\_\_ Date \_\_\_\_\_

Signature of Secretary \_\_\_\_\_ Date \_\_\_\_\_

An application for a license to conduct or operate a poker run shall be accompanied by the following:

- 1. A non-refundable \$25 filing fee. Such fee shall be paid by cash, check or cashier’s check.
- 2. The manager shall give a fidelity bond conditioned upon his/her honesty in the performance of his/her duties. Terms of the bond shall provide that notice shall be given in writing to the County not less than thirty (30) days prior to its cancellation.

*The County Clerk is authorized to waive this bond requirement by including a waiver provision in the license issued to an organization under this Ordinance, provided that a license containing such waiver provision shall be granted only by unanimous vote of the members of the licensed organization.*

\_\_\_\_\_ ORGANIZATION WILL PICK UP LICENSE

\_\_\_\_\_ PLEASE MAIL OUR LICENSE TO THE FOLLOWING ADDRESS:

\_\_\_\_\_  
NAME

\_\_\_\_\_  
ADDRESS CITY STATE ZIP

**STEPHENSON COUNTY, ILLINOIS**

C/O Stephenson County Clerk  
50 W Douglas Street ~ Suite 500  
Freeport, IL 61032  
815-235-8289

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**FINAL POKER RUN REPORT**

NAME OF ORGANIZATION \_\_\_\_\_

LICENSE NUMBER \_\_\_\_\_ DATE \_\_\_\_\_

**RECEIPTS**

*(Ticket Sales, Donation of prizes etc)*

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**EXPENSES**

*(Printing of Tickets, cost of prizes etc)*

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**DISTRIBUTION OF NET PROCEEDS**

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

*Signature of person completing the final report* \_\_\_\_\_

*Date* \_\_\_\_\_