

Part E - Officers of Applicant

(1) Office _____ Name of officer _____ Age _____

Residence address _____ Telephone No. (include area code)
Day _____ Evening _____

(2) Office _____ Name of officer _____ Age _____

Residence address _____ Telephone No. (include area code)
Day _____ Evening _____

(3) Office _____ Name of officer _____ Age _____

Residence address _____ Telephone No. (include area code)
Day _____ Evening _____

(4) Office _____ Name of officer _____ Age _____

Residence address _____ Telephone No. (include area code)
Day _____ Evening _____

Part F - Members of Applicant who will be in charge of the games

Name of member in charge	Residence address	Telephone No. (include area code) Day / Evening	Age
_____	_____	_____/_____ _____/_____	_____ _____
_____	_____	_____/_____ _____/_____	_____ _____
_____	_____	_____/_____ _____/_____	_____ _____
_____	_____	_____/_____ _____/_____	_____ _____

Part G - Members of Applicant who will assist in conducting the games

Name of member	Residence address	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____

Part H - Names of other organizations whose members will assist in conducting the games

Name and address of organization	How related	Identification No.
_____	_____	_____
_____	_____	_____
_____	_____	_____

If more space is needed in any section of this application, insert extra sheets of paper.

Part I - Statement of Applicant and member(s) in charge

State of New Jersey

} ss.

County of _____

We do hereby each make the following statement, under oath, with respect to the foregoing application:

1. The applicant (is) (is not) limited in its activities to the furtherance of one or more authorized purposes as defined in the Raffles Licensing Law.
2. Prior to the issuance of any license to it to conduct games of chance, the applicant was actively engaged in serving one or more "authorized purposes."
3. The applicant has received and used, and in good faith expects to continue to receive and use, to further one or more authorized purposes, funds from sources other than games of chance.
4. The conduct of the games on the occasion or occasions for which this application is made will be to raise and devote the entire net proceeds to the authorized purpose described in the application.
5. For each occasion for which a license is sought, one or more of the members listed who are familiar with the Raffles Licensing Law and the Rules and Regulations, will be in full charge of, and primarily responsible for, the conduct of the games.
6. No commission, salary, compensation, reward or recompense will be paid to any person for holding, operating or conducting or assisting in the holding, operation or conducting, of the games, except to bookkeepers or accountants for professional services not exceeding the amounts fixed by the Schedule of Fees, as well as the compensation for the Licensed Compensated Workers pursuant to N.J.A.C. 13:47-6A. No prize may be offered and given in cash, except as otherwise provided by the Raffles Licensing Law (N.J.S.A. 5:8-50 et seq.). If a cash prize under certain circumstances is permitted by the law, the amount of the cash prize may not exceed the limits prescribed by the Raffles Licensing Law.
7. All statements in the foregoing application are true.

****TWO SIGNATURES REQUIRED****
One Officer & One Member in Charge

Sworn and subscribed to before me this

_____ day of _____, 20 ____.

Notary Public (Print name)

Signature of Notary Public

Signature of Officer and Title

Signature of Member-in-Charge

Signature of Member-in-Charge

Signature of Member-in-Charge

Signature of Member-in-Charge



If more space is needed in any section of this application, insert extra sheets of paper.

Applicant's registration slip from the *Legalized Games of Chance Control Commission* must be presented to the Municipal Clerk with this application.

Township of Brick
Office of the Township Clerk
401 Chambers Bridge Road
Brick, New Jersey 08723

MEMBER IN CHARGE - RAFFLE/BINGO SWORN STATEMENT

Organization

Identification Number

Date

I, _____, do hereby swear that I meet all of the requirements contained in **N.J.S.A 5:8-27/5:8-53 LEGALIZED GAMES OF CHANCE CONTROL COMMISSION STATUTES** and that I am a bona fide active member of the applicant, of good moral character and have never been convicted of crime.

Signature

Street Address

City, State, Zip Code

Phone Number

Sworn to and subscribed before me this
_____ day of _____, 20_____.

Notary Public of New Jersey

Sample Ticket

Off Premises Raffle Awarding Cash

N.J.A.C. 13:47-8.8

Stub

Ticket

<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black; width: 100%;">Name</td> </tr> <tr> <td style="border-bottom: 1px solid black; width: 100%;">Address</td> </tr> <tr> <td style="border-bottom: 1px solid black; width: 33%;">City</td> <td style="border-bottom: 1px solid black; width: 33%;">State</td> <td style="border-bottom: 1px solid black; width: 33%;">ZIP code</td> </tr> <tr> <td colspan="3" style="border-bottom: 1px solid black;">Telephone Number</td> </tr> <tr> <td style="border-bottom: 1px solid black; width: 50%;">NJ LGCCC Identification#</td> <td colspan="2" style="border-bottom: 1px solid black;">Municipal RL #</td> </tr> </table> <p style="text-align: right; margin-top: 5px;">Ticket # _____</p>	Name	Address	City	State	ZIP code	Telephone Number			NJ LGCCC Identification#	Municipal RL #		<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black; width: 50%;">NJ LGCCC Identification #</td> <td style="border-bottom: 1px solid black; width: 50%;">Municipal RL #</td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 10px;"> <p>Name of Organization</p> <p style="font-size: 1.2em; font-weight: bold;">50/50</p> <p>This is a 50/50 cash raffle and the winner will receive 50% of the amount received for all tickets or rights to participate</p> </td> </tr> <tr> <td style="border-bottom: 1px solid black; width: 50%;">Date of Drawing</td> <td style="border-bottom: 1px solid black; width: 50%;">Time of Drawing</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black; text-align: center;"> <p>Location of Drawing</p> </td> </tr> <tr> <td colspan="2" style="padding: 5px;"> <p>Purpose to which entire proceeds will be devoted "No substitution of the offered prize may be made."</p> </td> </tr> <tr> <td style="border-bottom: 1px solid black; width: 50%;">Price of Ticket</td> <td style="border-bottom: 1px solid black; width: 50%;">Ticket #</td> </tr> </table>	NJ LGCCC Identification #	Municipal RL #	<p>Name of Organization</p> <p style="font-size: 1.2em; font-weight: bold;">50/50</p> <p>This is a 50/50 cash raffle and the winner will receive 50% of the amount received for all tickets or rights to participate</p>		Date of Drawing	Time of Drawing	<p>Location of Drawing</p>		<p>Purpose to which entire proceeds will be devoted "No substitution of the offered prize may be made."</p>		Price of Ticket	Ticket #
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This illustration is provided for your convenience. While the form of the ticket may vary, the information listed above must be contained on your printed ticket. If you require assistance with your ticket, please contact the office of Legalized Games of Chance Control Commission at (973) 273-8000. This sample ticket must be attached to the Application for Municipal Raffle License and submitted to the municipality.

Sample Ticket

Off Premises Merchandise Raffle

N.J.A.C. 13:47-8.7

Stub

Ticket

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