LG220 Application for Exempt Permit

An exempt permit may be issued to a manufic

An exempt permit, may be issued to a nonprofit organization that:

- conducts lawful gambling on five or fewer days, and
- awards less than \$50,000 in prizes during a calendar year.

If total raffle prize value for the calendar year will be \$1,500 or less, contact the Licensing Specialist assigned to your county by calling 651-539-1900.

Application Fee (non-refundable)

Applications are processed in the order received. If the application is postmarked or received 30 days or more before the event, the application fee is **\$100**; otherwise the fee is **\$150**.

Due to the high volume of exempt applications, payment of additional fees prior to 30 days before your event will not expedite service, nor are telephone requests for expedited service accepted.

ORGANIZATION INFORMATION	
Organization Name: Lions Club of Vergas Minnesota	Previous Gambling Permit Number: X-07445-22-030
Minnesota Tax ID Number, if any: <u>1362082</u>	Federal Employer ID Number (FEIN), if any: 416090464
Mailing Address: <u>PO BOX 12</u>	
City: Vergas	State: MN zip: 56587 County: Otter Tail
Name of Chief Executive Officer (CEO): Mary Ditt	erich
CEO Daytime Phone: 320-226-1074	EO Email: mditterich@arvig.net
Email permit to (if other than the CEO): rpjacoby	(permit will be emailed to this email address unless otherwise indicated below) @comcast.net
NONPROFIT STATUS	
Type of Nonprofit Organization (check one): Fraternal Religious	Veterans
Attach a copy of <u>one</u> of the following showing	Osici Nonprofit Organization
(DO NOT attach a sales tax exempt status or federal	employer ID number, as they are not proof of nonprofit status.)
IRS - Affiliate of national, statewide, or i If your organization fails under a parent 1. IRS letter showing your parent organi 2. the charter or letter from your parent	re from: Secretary of State website, phone numbers: www.sos.state.mn.us 651-296-2803 or toll from 1,977,551,6767
GAMBLING PREMISES INFORMATION	
Name of premises where the gambling event will be for raffles, list the site where the drawing will take i	conducted place): Vergas Event Center
Physical Address (do not use P.O. box): 140 West (Linden Street
Check one:	
City: Vergas	Zip: <u>56587 County: Otter Tail</u>
Township:	Zip: County:
Pate(s) of activity (for raffles, indicate the date of th	·
heck each type of gambling activity that your organ	ilzation will conduct:
Bingo Paddlewheels P	ull-Tabs Tipboards Raffle
levices may be borrowed from another organization	ds, raffle boards, paddlewheels, pull-tabs, and tipboards must be obtained in Control Board. EXCEPTION: Bingo hard cards and bingo ball selection authorized to conduct bingo. To find a licensed distributor, go to but the List of Licensees tab, or call 651-539-1900.

OCAL UNIT OF GOVERNMENT ACKNOWLEDGME ne Minnesota Gambling Control Board)	NT (required before submitting application to
CITY APPROVAL for a gambling premises located within city limits	COUNTY APPROVAL for a gambling premises located in a township
The application is acknowledged with no waiting period.	The application is acknowledged with no waiting period.
The application is acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days (60 days for a 1st class city).	
The application is denied.	The application is denied.
rint City Name: Vergas	Print County Name:
'	Signature of County Personnel: Date: Date:
111 4 Trans Com 11/16/200	Date:
The city or county must sign before submitting application to the Gambling Control Board.	TOWNSHIP (if required by the county) On behalf of the township, I acknowledge that the organization is applying for exempted gambling activity within the township limits: (A township has no statutory authority to approve or deny an application, per Minn. Statutes, section 349.213.) Print Township Name: Signature of Township Officer:
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Signature of Township Cartes
	Title: Date:
Chief Executive Officer's Signature: (Signature must be CEO's sign	urate to the best of my knowledge, I acknowledge the
Print Name: Mary Ditterich	MAIL APPLICATION AND ATTACHMENTS
REQUIREMENTS	Mail application with:
Complete a separate application for: • all gambling conducted on two or more consecutive days; • all gambling conducted on one day. Only one application is required if one or more raffle drawings conducted on the same day.	a copy of your proof of nonprofit status; and application fee (non-refundable). If the application is postmarked or received 30 days or more before the event the application fee is \$100; otherwise the fee is \$150. Make check payable to State of Minnesota.
Financial report to be completed within 30 days after the gambling activity is done: A financial report form will be mailed with your permit. Comple and return the financial report form to the Gambling Control Board.	1711 West County Road B, Suite 300 South Roseville, MN 55113
Your organization must keep all exempt records and reports for 3-1/2 years (Minn. Statutes, section 349.166, subd. 2(f)).	Call the Licensing Section of the Gambing Condo Section 651-539-1900.
Data privacy notice: The information requested on this form (and any attachments) will be used by the Gambling Control Board (Board) to determine your organization's qualifications to	ganization's name and ment of Public Safety; Attorney general ment of Administration, Minnesota Commissioners of Administration, Minnesota Management & Budget, and Revenue; Legislation and International gambling regulatory agencies; anyone pursuant to convert ment of Public Safety; Attorney general ment of Administration, Minnesota Management & Budget, and Revenue; Legislation and International gambling regulatory agencies; anyone pursuant to convert ment of the public Safety; Attorney general ment of Administration ment o

refuse to supply the information; nowever, if your organization refuses to supply this information, the Board may not be able to determine your organization's qualifications and, as a consequence, may refuse to issue a permit. If your organization supplies the information requested, the Board will be able to process the

public. It the Board does not issue a permit, an information provided remains private, with the exception of your organization's name and address which will remain public. Private data about your organization are available to Board members, Board staff whose work requires access to the information; Minnesota's Depart-

to the information; individuals and agencies for which law or legal order authorizes a new use or sharing of information after this notice was given; and anyone with your written consent.