

CITY OF ANN ARBOR CHARITABLE GAMING LICENSE APPLICATION FOR CITY COUNCIL RESOLUTION

| | Date: | | |
|--|------------------------|-------------------------------|------------|
| Please Return to: | | | |
| City Clerk's Office | | | |
| 301 E. Huron St. Ann Arbor, Mi 48104 | | | |
| AIII AIDOI, MI 40104 | | | |
| Official Name of Organization: | | | |
| is hereby requesting that it be recognized as a nonprof | it organization, opera | ating in the City of <i>i</i> | Ann Arbor, |
| for the purpose of obtaining a charitable gaming license | е. | | |
| | | | |
| Address of Organization (must be within the City lim | its of Ann Arbor) | City | Zip |
| | | | |
| Contact Person: | Phone No. | : | |
| Mailing Address: | Citv: | Zip: | |
| Mailing Address: (A copy of the approved Council resolution will be sent to this addr | ess.) | _ .p | |
| Does your organization have a website? YES / NO W | /ebsite address: | | |
| Describe what your organization does, or write your mi | ssion statement belc | ow. | |
| | | | |
| | | | |
| Location of Event: | | | |
| Type of Event (e.g. poker tournament, raffle, etc.): | | | |
| Date(s) of Event: | | | |
| *Please attach a copy of paperwork indicating 501(| c)(3) status with thi | is application. | |