

**Parish of Rapides Sales & Use Tax
5606 Coliseum Blvd
Alexandria, Louisiana 71303**

APPLICATION FOR LICENSE TO HOLD CHARITABLE RAFFLES, BINGO AND KENO

Please check one _____ City of Alexandria _____ Parish of Rapides

Please enclose check or money order made payable to Rapides Parish Sales & Use Tax Department in the amount of \$20.00 representing application fee which is nonrefundable. If the application is approved there will be a \$5.00 license fee.

I/WE HEREBY make application for a license to hold charitable raffles, bingo and keno and hereby certify to the following facts and agree to the following conditions:

A. Name and address of applicant. **(Please attach facts relating to incorporation and organization)**

B. Commanding officer information: **(Please attach same information for other Officers)**

Name: _____

Address: _____

City, State and Zip Code: _____

Date of Birth _____ Driver's License # _____ Social Security # _____

C. Specific kind of game(s) to be held: _____

D. Place, date and time game(s) to be held: _____

E. Expense to be incurred or paid, names and addresses of person(s) to whom, and the purpose for which they are to be paid: _____

F. Specific purpose to which net proceeds of game(s) will be devoted, and in what manner:

G. Description of prizes to be offered and/or given:

H. Name(s) and address(es) of all active member(s) under whom the game(s) will be held.

I/WE HEREBY CERTIFY that no commission, salary, compensation, reward or recompense will be paid to any person holding, operating, conducting, or assisting in the holding, operating or conducting of such game(s) of chance except for the compensation allowed by LA R.S. 4:715.

I/WE CERTIFY that I/we will be responsible for the holding, operation and conduct of such game(s) of chance in accordance with the terms of the license and the provisions of said laws, rules and regulations governing the holding, operation and conduct of such game(s) of chance if such license is granted.

Signed this _____ day of _____ 20____ at _____, Louisiana

Applicant

Member

Member

Member

Member

City of Alexandria Only

Investigated and recommended
For approval / denial of license.
Date: _____

Chief of Police

Approved / Denied
Alexandria City Council
Date: _____

City Clerk