Cobb County Sheriff's Office Raffle License Application

Persons interested in operating a raffle as defined by the Official Code of Georgia §16-12-22.1 must complete the following application and submit said application to the Sheriff of Cobb County prior to the operation of any raffle. The Sheriff shall refuse to grant a raffle license to any applicant/organization who fails to provide fully the information required.

1.	Information on applicant/person completing raffle application:			
	Complete Legal Name/ Date of Birth:			
	Home Address:			
	City/State/Zip:			
	Daytime Phone:			
	Email Address:			
	Association to the reques	ting Organization:		
2.	Information on the organization holding the raffle:			
	Registered Name of Organization:			
	Address:			
	City/State/Zip:			
	Date Founded:			
	County of Organization's Headquarters:			
3.	Information on primary individuals involved in operating, advertising, or promoting the raffle. Complete legal name should include middle and maiden names if applicable:			
	Complete Legal Name/ Date of Birth:			
	Home Address:			
	City/State/Zip:			
	Complete Legal Name/ Date of Birth:			
	Home Address:			
	City/State/Zip:			
	Complete Legal Name/ Date of Birth:			
	Home Address:			
	City/State/Zip:			

Specific raffle information: Date raffle is scheduled to start: Date raffle is scheduled to end: Address where raffle is to be conducted: City/State/Zip: Owner of property where raffle is being conducted: The following documents/information must be submitted with the Raffle Application: a) A determination letter from the Internal Revenue Service certifying that the applicant/organization is tax exempt under federal law. b) A statement from the Georgia Department of Revenue which declares your organization to be tax exempt under Georgia law (or verification from Georgia Secretary of States' Office or website showing your organization to be active and compliant). c) Documentation that shows the applicants' association with the organization. d) A copy of the lease/rental agreement if the location where the raffle is to take place is rented or leased. Has any of the person listed as an applicant, operator, advertiser, promoter, officer, director, surety, debtor, or one to which any financial obligation is owed by applicant ever been convicted of a crime (excluding minor traffic offenses)? yes no If yes, please list the full name, date of birth, social security number, offenses, date and location (county and state) of conviction on a separate sheet of paper and submit with the application. I certify that the above information is true and correct and that I have received, and read, a copy of

the Official Code of Georgia §16-12-22.1. I further certify that I understand the requirements to operate a raffle in the State of Georgia.

Applicant's Signature	
Must be electronic or	
actual signature:	
Date:	

Contact Information:

Kellay Kidney Cobb County Sheriff's Office Phone: 770-427-6560

Fax: 770-499-4682

Kellay.kidney@cobbcounty.org