



Charitable Gaming Division
c/o Accounting
Box 30023, Lansing, MI 48909
OVERNIGHT DELIVERY:
101 E. Hillsdale, Lansing, MI 48933
(517) 336-5780
www.michigan.gov/cg

RAFFLE LICENSE APPLICATION

For Bureau Use Only

ALLOW 6 WEEKS FOR PROCESSING.
PLEASE PRINT OR TYPE IN BLUE OR BLACK INK.

QUALIFICATION INFORMATION	1. Organization Name Kyren Anthony-Rose Jamison Foundation				2. Organization ID Number or Last License Number Issued R62648	
	3. Organization Street Address 7827 Faust Street		City Detroit	State MI	Zip Code 48228	
	Organization Mailing Address PO Box 28105		City Detroit	State MI	Zip Code 48228	County 82 Wayne
	4. Has your organization ever received a license such as bingo, millionaire party, raffle, charity game ticket, or numeral game? <input type="checkbox"/> Yes - Complete application and submit with the appropriate fee. <input checked="" type="checkbox"/> No - Please follow the instructions on the qualification guideline. If a guideline was not included or you do not understand it, contact our office at (517) 335-5780 to inquire as to what documentation must be submitted to qualify for licensing.					
	5. Is your organization a candidate committee, political committee, political party committee, ballot question committee, independent committee or any other committee as defined by, and organized pursuant to, the Michigan Campaign Finance Act 388 of the Public Acts of 1976, as amended, being sections 169.201 to 169.282 of the Michigan Compiled Laws? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			6. Has your organization received contributions or made expenditures of \$500 or more in the last calendar year for the purpose of influencing or attempting to influence the action of voters for or against the nomination or election of a candidate, or the qualification, passage, or defeat of a ballot question? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

SIGNATURE(S)	7. Provide name, title, home address, and telephone numbers for the PRINCIPAL OFFICER, e.g., president, grand knight, worthy matron, etc., and the vice president or equivalent and one other officer of the organization. SIGNATURE OF PRINCIPAL OFFICER REQUIRED - OR - signatures of the vice president or equivalent and one other officer. NOTE: Executive director signature not acceptable.		
	Name and Title		Street, City, State, ZIP Code
	Principal Officer Jervis Canty		19230 Lenore
	Title Chairman		Detroit, MI 48219
	Signature of Principal Officer <i>Jervis Canty</i>		Telephone Numbers Day (313) 212-9568 Evening (313) 212-9568 Date 11/08/21
	- OR -		
	Name and Title		Street, City, State, ZIP Code
	Vice President or Equivalent Wendy Dinkins		7827 Faust
	Title President		Detroit, MI 48228
	Signature of Vice President or Equivalent <i>Wendy Dinkins</i>		Telephone Numbers Day (313) 805-6363 Evening (313) 805-6363 Date
Name and Title		Street, City, State, ZIP Code	
Other Officer			
Title			
Signature of Other Officer		Telephone Numbers Day Evening Date	
By signing above, I CERTIFY that I am at least 18 years of age, the organization applying is a NONPROFIT organization, I have examined this application and there is no misrepresentation or falsification in the information stated or attached, and the facts underlying our original qualification status remain unchanged. I FURTHER CERTIFY that I am aware that false or misleading statements will be cause for rejection of this application or revocation of the right to obtain any future licenses and I AM AWARE OF AND AGREE TO the conditions of Act 382 of the Public Acts of 1972, as amended, and the rules and directives of the Michigan Bureau of State Lottery.			

PLEASE COMPLETE THE BACK PAGE OF THIS APPLICATION
PLEASE MAKE A COPY OF THE COMPLETED APPLICATION FOR YOUR RECORDS



RAFFLE INFORMATION	8. Contact Person Jervis Cauty			9. Raffle Location (building name, if any) Facebook Live	
	Mailing Address Where License Should Be Sent 19230 Lenore			Street Address 7827 Faust	
	City Detroit	State MI	ZIP Code 48219	City Detroit	
	Telephone Number (Day) (313) 212-9568	Telephone Number (Evening) (313) 212-9568		ZIP Code 48228	County 82 Wayne
	10. List name, home address, and telephone numbers of the person(s) in charge of raffle. Must be member for 6 months. If more than one chairperson, attach additional list.				
Raffle Chairperson Name Jervis Cauty			Street, City, State, ZIP Code 19230 Lenore Detroit, MI		Telephone Numbers Day (313) 212-9568 Evening (313) 212-9568
SMALL	11. If the total value of all prizes awarded in one day is \$500 or LESS, complete this section.				
	Drawing Date(s) and Time(s) (Must be between the hours of 8 a.m.-2 a.m.):			License Fee:	
	Date _____	Time a.m. _____ to _____ p.m.	All drawing dates included on this application must be at the same location. \$15 for 1, 2, or 3 drawing dates plus \$5 for each additional drawing date. (Example: 1 drawing date = \$15 fee, 8 drawing dates = \$30 fee.)		
	Date _____	Time a.m. _____ to _____ a.m.	Enter the total number of small drawing dates.		
	Date _____	Time a.m. _____ to _____ a.m.	\$15		
<input type="checkbox"/> Check here if there are additional drawing dates and attach list.					
LARGE	-OR- If the total value of all prizes awarded in one day is MORE than \$500, complete this section.				
	Drawing Date(s) and Time(s) (Must be between the hours of 8 a.m.-2 a.m.):			License Fee:	
	Date 02/14/20	Time p.m. 6:00 to 6:30 p.m.	All drawing dates included on this application must be at the same location.		
	Date _____	Time a.m. _____ to _____ a.m.	\$50 x 1 = \$50		
	<input type="checkbox"/> Check here if there are additional drawing dates and attach list.			Number of Dates	

TICKET INFORMATION	12. Will you be conducting an in-house raffle ONLY where there is no presale of the raffle tickets before the occasion? If yes, there is no need to complete the raffle ticket below.		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	13. Complete the boxes below in ink; ensure the ticket is printed with all of the required items. See Raffle Rule 506.			
	Indicate any additional information that will appear on the actual tickets.			
	RAFFLE		001 Ticket #	001 Ticket #
	Kyren Anthony-Rose Jamison Foundation Name of Licensee			
	02/14/2021 Drawing Date(s)	6:00 p.m. Drawing Time(s)		
	Prizes			
	\$300.00 Visa Gift Card First Prize * \$150.00 Amazon Gift Card Second Prize (if applicable) \$100.00 Gas Gift Card Third Prize (if applicable) Minimum 50/50 Prize (if applicable)			
	7827 Faust Raffle Location		\$5 Ticket Price (to be added when issued) License Number	
			Purchaser's Name Purchaser's Address Purchaser's Phone #	
* For large prizes, you may want to include a disclaimer that states "If xxx (indicate number) tickets are not sold, the drawing will revert to a 50/50 raffle with the minimum prize of \$xxx (indicate dollar amount) awarded."				

Make checks payable to: STATE OF MICHIGAN
 Submit completed application, supporting documents, and license fee to:
 Charitable Gaming Division, c/o Accounting, Box 30023, Lansing, MI 48909
OVERNIGHT DELIVERY: 101 E. Hillsdale, Lansing, MI 48933

PRIZES AWARDED UNDER \$500

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PRIZES AWARDED OVER \$500

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