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LG220 Application for Exempt Permit

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.
 total raffle prize value for the calendar year will be

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 violate of exempt applications, payment of

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.

your county by canning 031-339-1900.		
ORGANIZATION INFORMATION		
Organization Name: Lincoln Park Business Group	Previous Gambling Permit Number: X-32457	
Minnesota Tax ID Number, if any: 4728282	Federal Employer ID Number (FEIN), if any: 41-6037915	
Mailing Address: 2002 West Superior Street, Suite 8		
City: Duluth	State: MN Zip: 55806 County: St. Louis County	
Name of Chief Executive Officer (CEO): William E	Berg	
Daytime Phone: 218-727-6573	Email: info@lpbg.org	
NONPROFIT STATUS	ing and the first well arm of the city a specification of previous	
Type of Nonprofit Organization (check one): Fraternal Religious	Veterans Other Nonprofit Organization	
Attach a copy of one of the following showing proof of nonprofit status:		
IRS toll free at 1-877-829-5500. IRS - Affiliate of national, statewide, or If your organization falls under a parent 1. IRS letter showing your parent organ 2. the charter or letter from your paren	te from: s Services Division Secretary of State website, phone numbers: www.sos.state.mn.us 651-296-2803, or toll free 1-877-551-6767 er in your organization's name your federal income tax exempt letter, have an organization officer contact the international parent nonprofit organization (charter) organization, attach copies of both of the following: nization is a nonprofit 501(c) organization with a group ruling, and it organization recognizing your organization as a subordinate.	
GAMBLING PREMISES INFORMATION		
Name of premises where the gambling event will be (for raffles, list the site where the drawing will take	place): VFW Post 137	
Address (do not use P.O. box): 2024 W. Michigan City or Township: Duluth	Zini MN Country St. Louis County	
Date(s) of activity (for raffles, indicate the date of the drawing): November 19,	₩ 3	
* Gambling equipment for bingo paper, paddlew the Minnesota Gambling Control Board. EXCEPT:	Pull-Tabs* Tipboards* ded for the calendar year: \$4000.00 heels, pull-tabs, and tipboards must be obtained from a distributor licensed by ION: Bingo hard cards and bingo number selection devices may be borrowed bingo. To find a licensed distributor, go to www.mn.gov/gcb and click on	

LOCAL UNIT OF GOVERNMENT ACKNOWLEDGME the 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 acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days.
The application is denied.	The application is denied.
Print City Name: Declath	Print County Name:
Signature of Sity Personnel:	Signature of County Personnel:
Title: Cuts Clark Date: 9/8/15	Title: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:
Gambing Control Duald.	Signature of Township Officer:
	Title: Date:
CHIEF EXECUTIVE OFFICER'S SIGNATURE (requ	ired)
The information provided in this application is complete and accurate report will be completed and returned to the Board within 30 days	ate to the best of my knowledge. I acknowledge that the financia of the event date.
Chief Executive Officer's Signature: (Signature must be CEO's signature)	re; designee may not sign)
Print Name: William Berg	
REQUIREMENTS	MAIL APPLICATION AND ATTACHMENTS
Complete a separate application for: • all gambling conducted on two or more consecutive days, or • all gambling conducted on one day.	Mail application with: a copy of your proof of nonprofit status, and
Only one application is required if one or more raffle drawings are conducted on the same day.	the application fee is \$100 ; otherwise the fee is \$150 .
Financial report to be completed within 30 days after the gambling activity is done: A financial report form will be mailed with your permit. Complete and return the financial report form to the Gambling Control Board.	Make check payable to State of Minnesota . To: 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)).	Questions? Call the Licensing Section of the Gambling Control Board at 651-539-1900.
Data privacy notice: The information requested application. Your organi	zation's name and ment of Public Safety; Attorney General;

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 be involved in lawful gambling activities in Minnesota. Your organization has the right to refuse to supply the information; however, 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

application. Your organization's name and address will be public information when received by the Board. All other information provided will be private data about your organization until the Board issues the permit. When the Board issues the permit, all information provided will become public. If the Board does not issue a permit, all 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-

ment of Public Safety; Attorney General; Commissioners of Administration, Minnesota Management & Budget, and Revenue; Legislative Auditor, national and international gambling regulatory agencies; anyone pursuant to court order; other individuals and agencies specifically authorized by state or federal law to have access 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.