



City of Lacon

406 5th Street Lacon, Illinois 61540

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www.laconcity.com

Raffle Permit Application

Applicant: _____

Address: _____

City: _____ State: _____ Zip: _____

Business/Organization: _____

Address: _____

Date of Raffle: _____

Time: _____ am/pm until: _____ am/pm

Address where winning chances will be redeemed: _____

Item(s) to be raffled: _____

Signature

Date