RESOLUTION 03:02-15

RESOLUTION GRANTING
A RAFFLE LICENSE WITHIN THE
CITY OF EAST GULL LAKE

WHEREAS, the Ducks Unlimited requested from the City of East Gull Lake permission for conducting a raffle booth within the City.

NOW, THEREFORE, BE IT RESOLVED by the City of East Gull Lake, County of Cass, and State of Minnesota, to grant permission for the Ducks Unlimited to conduct a raffle booth at Madden's on Gull Lake on April 24, 2015.

The foregoing Resolution, offered by Councilor Demgen, and upon the motion, supported by Councilor Hoffmann, was declared adopted this 5th day of March, 2015, by the following roll call vote.

Ayes: Councilors Ruttger, Demgen & Hoffmann

Absent: Mayor Kavanaugh & Councilor Lang

Acting Mayor Ruttger

Robert Mason, City Administrator

COPY

MINNESOTA LAWFUL GAMBLING

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.

If total prize value for the year will be $1,500 or less, contact the licensing specialist assigned to your county.

Application fee (non refundable)

If application is postmarked or received 30 days or more before the event **$50**; otherwise **$100**.

ORGANIZATION INFORMATION

Organization name: Ducks Unlimited

Previous gambling permit number: x-18004-14-006

Minnesota tax ID number, if any:

Federal employer ID number (FEIN), if any: 93-0990265

Type of nonprofit organization. Check one.

_____ Fraternal _____Religious _____Veterans X Other nonprofit organization

Mailing address	City	State	Zip code	County
3895 West Lake Street	Pequot Lakes	MN	56472	Crow Wing

Name of chief executive officer [CEO]	Daytime phone number	E-mail address
Aaron A. Peterson	218-831-0434	aaronapeterson99@gmail.com

NONPROFIT STATUS

Attach a copy of ONE of the following for proof of nonprofit status.

_____ **Nonprofit Articles of Incorporation OR a current Certificate of Good Standing.**
Don't have a copy? This certificate must be obtained each year from:
Secretary of State, Business Services Div., 60 Empire Drive, Suite 100, St. Paul, MN 55103
Phone: 651-296-2803

_____ **IRS income tax exemption [501(c)] letter in your organization's name.**
Don't have a copy? To obtain a copy of your federal income tax exempt letter, have an organization officer contact the IRS at 877-829-5500.

X **IRS - Affiliate of national, statewide, or international parent nonprofit organization [charter]**
If your organization falls under a parent organization, attach copies of **both** of the following:
a. IRS letter showing your parent organization is a nonprofit 501(c) organization with a group ruling, and
b. the charter or letter from your parent organization recognizing your organization as a subordinate.

GAMBLING PREMISES INFORMATION

Name of premises where the gambling event will be conducted. For raffles, list the site where the drawing will take place.
Maddens on Gull Lake

Address [do not use PO box]	City or township	Zip code	County
11266 Pine Beach Pen.	Brainerd	56401	Cass

Date[s] of activity. For raffles, indicate the date of the drawing.
April 24, 2015

Check each type of gambling activity that your organization will conduct.

___Bingo* X___Raffle [**total value of raffle prizes awarded for year $** 25,000.00] ___Paddlewheels* ___Pull-tabs* ___Tipboards*

***Gambling equipment** for bingo paper, paddlewheels, pull-tabs, and tipboards must be obtained from a distributor licensed by the Minnesota Gambling Control Board. EXCEPTION: Bingo hard cards and bingo number selection devices may be borrowed from another organization authorized to conduct bingo.

To find a licensed distributor, go to ***www.gcb.state.mn.us*** and click on ***Distributors*** under the ***WHO'S WHO? LIST OF LICENSEES***, or call 651-539-1900.

Department of the Treasury
Internal Revenue Service

OCT 24 1985

Date of This Notice

29034073

10-21-85

If you inquire about your account, please refer to this number or attach a copy of this notice.

Employer Identification Number

93-0900265

PAUL BUNYAN CHAPTER-DUCKS UNLIMITED
INC
BRAINERD MN
1 WATERFOWL WAY AT GILMER RD
LONG GROVE IL 60047

NOTICE OF NEW EMPLOYER IDENTIFICATION NUMBER ASSIGNED

Thank you for your Form SS-4, Application for Employer Identification Number. The number assigned to you is shown above. This number will be used to identify your business account and related tax returns and documents, even if you do not have employees.

Please keep a copy of this number in your permanent records. Use this number and your name, exactly as shown above, on all Federal tax forms that require this information, and refer to the number on all tax payments and tax-related correspondence or documents.

If your business is a partnership which must obtain prior approval for its tax year, the tax year you entered in Block 3 of your Form SS-4 does not establish a tax year. For guidance in determining if you must request prior approval and the method of doing so, see IRS Publication 538, Accounting Periods and Methods, available at most IRS offices.

Please note that the assignment of this number does not grant tax-exempt status to nonprofit organizations. For details on how to apply for this exemption, see IRS Publication 557, Tax-Exempt Status for Your Organization, available at most IRS offices.

For Exempt Organizations, please see the message on the reverse side.

Thank you for your cooperation.

575 0

Form 5372 (Rev. 1-85)

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*U.S. GPO 1985-463-673

Form SS-4
(Rev. 9-82)
Department of the Treasury
Internal Revenue Service

Application for Employer Identification Number

(For use by employers and others as explained in the instructions. Please read the instructions before completing this form.)

OMB No. 1545-0003 Expires 9-30-85

1 Name (True name and not trade name. If partnership, see page 4.)
Paul Bunyan Chapter - Ducks Unlimited, Inc.

2 Social security no., if sole proprietor

3 Ending month of accounting year
December 31

4 Trade name, if any, of business (if different from item 1)

5 General partner's name, if partnership; principal officer's name, if corporation; or grantor's name, if trust

6 Address of principal place of business (Number and street)

7 Mailing address, if different 1 Waterfowl Way at Gilmer Rd. Long Grove, IL 60047

8 City, State, and ZIP code
Brainerd, MN

9 County of principal business location
Crow Wing

10 Type of organization
☐ Individual ☐ Trust ☐ Partnership ☐ Other (specify)
☐ Governmental ☒ Nonprofit organization ☐ Corporation

11 Date you acquired or started this business (Mo., day, year)
1/1/85

12 Reason for applying
☒ Started new business ☐ Purchased going business ☐ Other (specify)

13 First date you paid or will pay wages for this business (Mo., day, year)
N/A

14 Nature of principal business activity (See instructions on page 4.)
Charitable, Scientific, Educational- Wildlife Conservation

15 Do you operate more than one place of business? ☐ Yes ☒ No

16 Peak number of employees expected in next 12 months (if none, enter "0") ►

Nonagricultural	Agricultural	Household
0	0	0

17 If nature of business is manufacturing, state principal product and raw material used.
N/A

18 To whom do you sell most of your products or services?
☐ Business establishments (wholesale) ☐ General public (retail) ☐ Other (specify) N/A

19 Have you ever applied for an identification number for this or any other business? ☐ Yes ☐ No
If "Yes," enter name and trade name. Also enter approx. date, city, and State where you applied and previous number if known. ►

Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief it is true, correct, and complete.

Telephone number (include area code)
(312) 438-4300

X Signature and Title ► Chairman Date ► 9/25/85

Please leave blank ►	Geo.	Ind.	Class	Size	Reas. for appl.	Part I

OCT 3 1985

DUCKS UNLIMITED, INC., CHAPTER CHARTER

DUCKS UNLIMITED, INC., a District of Columbia not-for-profit corporation does hereby officially recognize and Charter the PAUL BUNYAN Chapter BRAINERD (City) MINNESOTA (State), as an official Chapter of Ducks Unlimited, Inc. This Charter shall remain in force and effect for so long as the aforementioned Chapter shall abide by and comply with the then current and existing Articles of Incorporation, Code of Regulations, Operational Policies as set forth in the Operating Manual and Chapter Guidelines and Regulations, of Ducks Unlimited, Inc.

IN WITNESS WHEREOF, I, PETER H. COORS, President of Ducks Unlimited, Inc., have caused to be executed this Local Committee Charter on this 25th day of Sept., 1985.

DUCKS UNLIMITED, INC.

By: Peter H. Coors
Peter H. Coors, President

ACCEPTED by the Paul Bunyan Chapter Brainerd (City) Minnesota (State), this 25th day of Sept, 1985.

By: [signature]
Chairman

AUTHORIZATION

The undersigned, Chairman of the Paul Bunyan Chapter of Ducks Unlimited, Inc., hereby authorizes Ducks Unlimited, Inc., to include said Chapter in an application for group income tax exemption under Section 501.(c) (3) of the Internal Revenue Code, thereby relieving said Chapter from the burden of obtaining a separate exemption determination.

Paul Bunyan
Chapter of Ducks Unlimited, Inc.

Brainerd Minn.
(City) (State)

9/25/85
Date

By: [signature]
Chairman

7/85