

GARY COOPER DAVIS FOUNDATION

3389 Summit Ridge Rochester Hills MI. 48306

Tax ID 26-0413595

July 1st, 2018

Michigan Gaming Control Board
P.O. Box 30786
Lansing, MI. 48909

Dear Charitable Gaming Control representative,

On May 13, 2004, Officer Gary Cooper Davis of the Bloomfield Township Police Department was killed while in the line of duty, by a drunk driver. In the summer of 2007, the Gary Cooper Davis Foundation Inc. was created. Its purpose is simple; to support the passions Gary Davis lived for. The mission of the Gary Cooper Davis Foundation is to honor the legacy of fallen Officer Gary Davis, in continued protection and service of the community through supporting interests and intentions that were close to his heart. In this way, we will keep his memory alive.

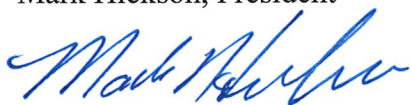
The foundation hosts a Softball game each year and gathers sponsorships for this event. This has been our only form of revenue. We have applied with you for a Raffle License.

Thank you for helping me along with this process. You have a completed application with one exception, a copy of the local government body resolution stating the foundation is recognized nonprofit in the community. Included with this correspondence is this document.

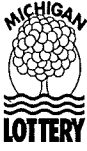
Please contact me if you have any questions or if you need additional information.

Thank you,

Mark Hickson, President



Gary Cooper Davis Foundation
248.505.7713
garycooperdavis@yahoo.com



Charitable Gaming Division
 c/o Accounting
 Box 30023, Lansing, MI 48909
OVERNIGHT DELIVERY:
 101 E. Hillsdale, Lansing, MI 48933
 (517) 335-5780
 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 Gary Cooper Davis Foundation % Mark Hickson				2. Organization ID Number or Last License Number Issued
	3. Organization Street Address 3389 Summit Ridge Dr	City Rochester Hills	State MI	Zip Code 48306	
	Organization Mailing Address	City	State	Zip Code	County 63 Oakland
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	Telephone Numbers
	Principal Officer Mark Hickson	3389 Summit Ridge Rd	Day (248) 505-7713
	Title President	Rochester Hills, MI 48306	Evening
	Signature of Principal Officer		Date
	- OR -		
	Name and Title	Street, City, State, ZIP Code	Telephone Numbers
	Vice President or Equivalent		Day
	Title		Evening
	Signature of Vice President or Equivalent		Date
	Name and Title	Street, City, State, ZIP Code	Telephone Numbers
	Other Officer		Day
Title		Evening	
Signature of Other Officer		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 mark Hickson			9. Raffle Location (building name, if any)		
	Mailing Address Where License Should Be Sent			Street Address		
	City	State	ZIP Code	City		
	Telephone Number (Day) (248) 505-7713		Telephone Number (Evening)	ZIP Code	County	
	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		Street, City, State, ZIP Code		Telephone Numbers		
Name				Day		
				Evening		
11. If the total value of all prizes awarded in one day is \$500 or LESS, complete this section.						
SMALL	Drawing Date(s) and Time(s) (Must be between the hours of 8 a.m.-2 a.m.):			License Fee:		
	Date <u>08/18/87</u>	Time p.m.	_____ to _____ a.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, 6 drawing dates = \$30 fee.)		
	Date _____	Time a.m.	_____ to _____ a.m.	Enter the total number of small drawing dates. <u>1</u>		
	Date _____	Time a.m.	_____ to _____ a.m.	\$15		
<input type="checkbox"/> Check here if there are additional drawing dates and attach list.						
-OR- If the total value of all prizes awarded in one day is MORE than \$500, complete this section.						
LARGE	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 _____ a.m.	All drawing dates included on this application must be at the same location.		
	Date _____	Time a.m.	_____ to _____ a.m.	\$50 x _____ = \$0		
				Number of Dates		
<input type="checkbox"/> Check here if there are additional drawing dates and attach list.						

TICKET INFORMATION	12. Will you be conducting an in-house raffle ONLY where there is no presale of the raffle tickets before the occasion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	If yes, there is no need to complete the raffle ticket below.	
	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	<u>001</u> Ticket #
	Name of Licensee	<u>001</u> Ticket #
	Drawing Date(s)	p.m.
	Prizes	Drawing Time(s)
	First Prize *	Purchaser's Name
	Second Prize (if applicable)	Purchaser's Address
Third Prize (if applicable)	Purchaser's Phone #	
Minimum 50/50 Prize (if applicable)		
	Ticket Price	
Raffle Location	<u>(to be added when issued)</u> License Number	

* 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