

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 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 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.

ORGANIZATION INFORMATION

Organization Name: NWTF-Long Spurs of Sunrise River Previous Gambling Permit Number: [REDACTED]

Minnesota Tax ID Number, if any: [REDACTED] Federal Employer ID Number (FEIN), if any: [REDACTED]

Mailing Address: PO Box: 146

City: North Branch State: MN Zip: 55056 County: Chisago

Name of Chief Executive Officer (CEO): Matthew Holmstrom

CEO Daytime Phone: [REDACTED] CEO Email: [REDACTED]
(permit will be emailed to this email address unless otherwise indicated below)

Email permit to (if other than the CEO): _____

NONPROFIT STATUS

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:

(DO NOT attach a sales tax exempt status or federal employer ID number, as they are not proof of nonprofit status.)

A current calendar year Certificate of Good Standing
Don't have a copy? Obtain this certificate from:
MN Secretary of State, Business Services Division Secretary of State website, phone numbers:
60 Empire Drive, Suite 100 www.sos.state.mn.us
St. Paul, MN 55103 651-296-2803, or toll free 1-877-551-6767

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 toll free at 1-877-829-5500.

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:
1. IRS letter showing your parent organization is a nonprofit 501(c) organization with a group ruling; and
2. 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): Stacy/Lent town Hall

Physical Address (do not use P.O. box): 33155 Hemingway Ave.

Check one:

City: Stacy Zip: 55079 County: chisago

Township: _____ Zip: _____ County: _____

Date(s) of activity (for raffles, indicate the date of the drawing): 1 2-8-2025

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

Bingo Paddlewheels Pull-Tabs Tipboards Raffle

Gambling equipment for bingo paper, bingo boards, raffle boards, paddlewheels, pull-tabs, and tipboards must be obtained from a distributor licensed by the Minnesota Gambling Control Board. EXCEPTION: Bingo hard cards and bingo ball selection devices may be borrowed from another organization authorized to conduct bingo. To find a licensed distributor, go to www.mn.gov/gcb and click on **Distributors** under the **List of Licensees** tab, or call 651-539-1900.

LOCAL UNIT OF GOVERNMENT ACKNOWLEDGMENT (required before submitting application to the Minnesota Gambling Control Board)

**CITY APPROVAL
for a gambling premises
located within city limits**

- 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 denied.

Print City Name: _____

Signature of City Personnel: _____

Title: _____ Date: _____

The city or county must sign before submitting application to the Gambling Control Board.

**COUNTY APPROVAL
for a gambling premises
located in a township**

- 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.
- The application is denied.

Print County Name: _____

Signature of County Personnel: _____

Title: _____ Date: _____

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.)

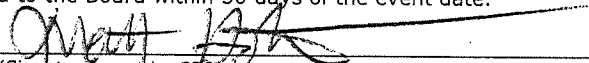
Print Township Name: _____

Signature of Township Officer: _____

Title: _____ Date: _____

CHIEF EXECUTIVE OFFICER'S SIGNATURE (required)

The information provided in this application is complete and accurate to the best of my knowledge. I acknowledge that the financial report will be completed and returned to the Board within 30 days of the event date.

Chief Executive Officer's Signature:  Date: 5-20-24
(Signature must be CEO's signature; designee may not sign)

Print Name: Matthew Holmstrom

REQUIREMENTS

Complete a separate application for:

- all gambling conducted on two or more consecutive days; or
- all gambling conducted on one day.

Only one application is required if one or more raffle drawings are conducted on the same day.

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.

Your organization must keep all exempt records and reports for 3-1/2 years (Minn. Statutes, section 349.166, subd. 2(f)).

MAIL APPLICATION AND ATTACHMENTS

Mail application with:

- _____ a copy of your proof of nonprofit status; and
- _____ application fee (non-refundable). If the application is postmarked or received 30 days or more before the event, the application fee is **\$100**; otherwise the fee is **\$150**. Make check payable to **State of Minnesota**.

To: Minnesota Gambling Control Board
1711 West County Road B, Suite 300 South
Roseville, MN 55113

Questions?

Call the Licensing Section of the Gambling Control Board at 651-539-1900.

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.



Town Hall RENTAL APPLICATION

33155 Hemingway Ave
Stacy, MN 55079
(651) 462-3009

Date of Event: 2-8-25 Type of Event: Hunting Heritage Banquet
Rental Hours: Starting Time: 8 am/pm Ending Time: 12 am/pm
(All events must end no later than MIDNIGHT.)
Applicant Information:
Name of Applicant: Matt Holmstrom Date of Application: 2-14-24
Address: 45051 Galaxy Ave, Harris MN 55032
Phone: 651-755-5777 Email: matt.holmstrom5777@gmail.com

Residency: STACY RESIDENT NON-RESIDENT

| TYPE OF EVENT | CITY OF STACY RESIDENT | CITY OF STACY NON-RESIDENT |
|--|------------------------|----------------------------|
| Application Fee (Non-refundable) | <u>\$100.00</u> | \$100.00 |
| Damage Deposit | <u>\$300.00</u> | \$300.00 |
| Non-Public Event | <u>\$600.00</u> | \$950.00 |
| Public Event | \$800.00 | \$1050.00 |
| Daytime Event (5 hour max. Event must end no later than 6:00 pm) | \$200.00 | \$450.00 |
| Woods Room (3 hour minimum) | \$35.00 | \$55.00 |
| Hanging décor or lights | \$25.00 per hour | \$35.00 per hour |

Rental Fees & Damage Deposit: A non-refundable application fee (\$100) must be paid at the time of submitting this Application. All additional fees and the damage deposit must be paid to the City of Stacy at least 30 days before the event or this application will be void. The applicable fees are those as set by the former Township and the City Council. NOTE: Decorations installed with NAILS or SCREWS shall be subject to a \$500.00 fine added to your damage deposit. Hooks have been placed every 8 feet in the Hall for hanging décor and Command™ hooks are allowed. Décor that requires a lift must be performed by Maintenance Staff and is subject to charge paid by the renter.

Name and address for the damage deposit refund: Matt Holmstrom 45051 Galaxy Ave Harris MN 55032
Name Address

Set-up Date & Times: 2-7-25 am/pm Clean-up Date & Times: 2-8-25 am/pm
(Clean-up must be done by 11 a.m. Sunday after Saturday events.)

Alcohol: Will any alcohol be brought to or consumed at the Event? Yes No

BARTENDING: If you plan on selling liquor, you must have a liquor-licensed and insured bar service at the hall during open bar hours. If you plan on providing alcohol at no cost, you are limited to beer and wine only. Your Host Liability insurance from your homeowner's or renter's insurance must be provided before your event. No persons under the age of 21 may be behind the bar or provide liquor service.

IMPORTANT: Alcohol may NOT be sold or otherwise exchanged for compensation in any way in connection with the use of the Hall without the proper permits and approval by the Stacy City Council.

Applicant understands and agrees that if its application is approved, the applicant is fully responsible for the event and is subject to the terms and conditions of the Town Hall Rental Policy.

Applicant's Signature: [Signature] Date: 2-14-24

CITY USE ONLY

Application Received: [Signature] /20
Rental Approved: 1 /20

| Type of Fee | Due | Paid | Refund |
|--------------------------------------|---------------|-------------|----------------|
| Application Fee Due with Application | \$100 Due on: | \$ Paid on: | Non-Refundable |
| Hall Rental Fee | \$ Due on: | \$ Paid on: | \$ Paid on: |
| Damage Deposit | \$300 Due on: | \$ Paid on: | \$ Paid on: |

Revised 12/23

paid in full 2/20/24
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