



September 4, 2024

Jeanette Moeller
City of Long Lake
450 Virginia Avenue
Long Lake, MN 55356

Dear Jeanette,

I am submitting our applications for the Day of the Dead celebration 2024 for consideration by the city. Enclosed are: the event flier, gambling application, Certificate of Good Standing, liquor license application and liquor license fee. I very much appreciate your assistance in helping me through this process.

The Day of the Dead celebration will be held in the Community Center and Fireside Room of the Church of St. George on Saturday, November 2 from 5pm-8:00pm. The event will include a traditional Mexican dinner and entertainment. There will also be a raffle and raffle drawing at the conclusion of the event. Alcohol will be available for purchase and IDs will be checked.

If you have questions, you may contact:

Sara Dore: 952-473-1247, Parish Staff, Church of St. George

Thank you for your assistance. Let me know if you need any further information.

Many thanks and God Bless,

Sara Dore
Parish Secretary



**St George Latino Community
invites you to celebrate the
traditional Mexican**

**"Dia de los Muertos"
(Day of the Dead)**

Date: Saturday, November 2nd

Time: 5:00 pm (after the 4:00 pm Mass)

Location: St. George Community Center

Authentic Mexican dinner to include enchiladas,
rice, and beans

Fundraising event to support the
St. George Latino Community



Minnesota Department of Public Safety
Alcohol and Gambling Enforcement Division
445 Minnesota Street, Suite 1600, St. Paul, MN 55101
651-201-7507 TTY 651-282-6555

**APPLICATION AND PERMIT FOR A 1 DAY
TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE**

Name of organization Church of St George		Date of organization Jan 1, 1916	Tax exempt number 41-0797341
Organization Address (No PO Boxes) 133 N Brown Rd	City Long Lake	State MN	Zip Code 55356
Name of person making application Sara Dore		Business phone 952-473-1247	Home phone 952-426-9445
Date(s) of event November 2, 2024	Type of organization <input type="checkbox"/> Microdistillery <input type="checkbox"/> Small Brewer <input type="checkbox"/> Club <input type="checkbox"/> Charitable <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other non-profit		
Organization officer's name Fr Shane Stoppel-Wasinger	City Long Lake	State MN	Zip Code 55356
Organization officer's name Dr. William Kottemann	City Long Lake	State MN	Zip Code 55356
Organization officer's name Daren Grothaus	City Minnetrista	State MN	Zip Code 55356

Location where permit will be used. If an outdoor area, describe.
Fireside Room and Community Center of the Church of St. George.

If the applicant will contract for intoxicating liquor service give the name and address of the liquor license providing the service.

If the applicant will carry liquor liability insurance please provide the carrier's name and amount of coverage.

Catholic Mutual Limited Liquor Liability, \$500,000

APPROVAL

APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEFORE SUBMITTING TO ALCOHOL AND GAMBLING ENFORCEMENT

CITY OF LONG LAKE
City or County approving the license
\$25.00
Fee Amount

Event in conjunction with a community festival ☐ Yes ☐ No

Current population of city
Jeanette Moeller, City Clerk
Please Print Name of City Clerk or County Official

Date Approved
Permit Date
jmoeller@longlake.mn.gov
City or County E-mail Address

J Moeller
Signature City Clerk or County Official

**CLERKS NOTICE: Submit this form to Alcohol and Gambling Enforcement Division 30 days prior to event
No Temp Applications faxed or mailed. Only emailed.**

ONE SUBMISSION PER EMAIL, APPLICATION ONLY.

**PLEASE PROVIDE A VALID E-MAIL ADDRESS FOR THE CITY/COUNTY AS ALL TEMPORARY
PERMIT APPROVALS WILL BE SENT BACK VIA EMAIL. E-MAIL THE APPLICATION SIGNED BY
CITY/COUNTY TO AGE.TEMPORARYAPPLICATION@STATE.MN.US**

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: Church of St. George Previous Gambling Permit Number: X- X-27024-24-021

Minnesota Tax ID Number, if any: 9115209 Federal Employer ID Number (FEIN), if any: 41-0797341

Mailing Address: 133 N Brown Rd

City: Long Lake State: MN Zip: 55356 County: Hennepin

Name of Chief Executive Officer (CEO): Fr Shane Stoppel-Wasinger

CEO Daytime Phone: 952-473-1247 CEO Email: frshane@stgeorgelonglake.org
(permit will be emailed to this email address unless otherwise indicated below)

Email permit to (if other than the CEO): info@stgeorgelonglake.org

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
60 Empire Drive, Suite 100
St. Paul, MN 55103
Secretary of State website, phone numbers:
www.sos.state.mn.us
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): Church of St. George

Physical Address (do not use P.O. box): 133 N Brown Rd

Check one:

☒ City: Long Lake Zip: MN County: 55356

☐ Township: _____ Zip: _____ County: _____

Date(s) of activity (for raffles, indicate the date of the drawing): November 2, 2024

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: Fr. Shane Stoppel-Wasinger Date: 9/4/2024
(Signature must be CEO's signature, designee may not sign)

Print Name: Fr Shane Stoppel-Wasinger**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.

This form will be made available in alternative format (i.e. large print, braille) upon request.

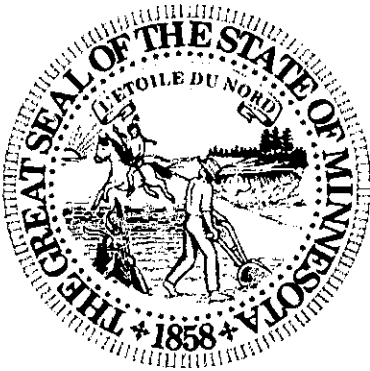
An equal opportunity employer

**Office of the Minnesota Secretary of State
Certificate of Existence and Registration**

I, Steve Simon, Secretary of State of Minnesota, do certify that: The entity listed below was filed under the chapter of Minnesota Statutes listed below with the Office of the Secretary of State on the date listed below and that this entity or filing is registered at the time this certificate has been issued.

Name:	The Church of Saint George of Long Lake
Date Filed:	09/13/1916
File Number:	CH-84
Minnesota Statutes, Chapter:	Not Available
Home Jurisdiction:	Not Available

This certificate has been issued on: 06/03/2024



Steve Simon

Steve Simon
Secretary of State
State of Minnesota