

**2E. Consideration of approving an application for a temporary charitable gambling permit for a raffle to be conducted by Wright County Ducks Unlimited, Chapter 39 on May 4, 2026, at River City Extreme, 3875 School Blvd.**

<b>Prepared by:</b> City Clerk	<b>Meeting Date:</b> 3/23/2026	<input checked="" type="checkbox"/> <b>Consent Agenda Item</b> <input type="checkbox"/> <b>Regular Agenda Item</b>
<b>Reviewed by:</b> N/A	<b>Approved by:</b> City Administrator	

**ACTION REQUESTED**

Motion to approve the temporary gambling permit for Wright County Ducks Unlimited, Chapter 39 for an event on May 4, 2026, being held at River City Extreme located at 3875 School Blvd.

**REFERENCE AND BACKGROUND**

Wright County Ducks Unlimited has applied for a temporary charitable gambling permit for a raffle to be held on May 4, 2026. The event is being held at River City Extreme.

To receive a permit from the State, the City must approve the application.

**STAFF RECOMMENDED ACTION**

City staff recommends approval of the temporary gambling permit.

**SUPPORTING DATA**

- Application

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 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: Wright County Ducks Unlimited Chapter 039 Previous Gambling Permit Number: X- 86012  
 Minnesota Tax ID Number, if any: \_\_\_\_\_ Federal Employer ID Number (FEIN), if any: \_\_\_\_\_  
 Mailing Address: 1004 Ridgehaven Cir  
 City: Buffalo State: MN Zip: 55313 County: Wright  
 Name of Chief Executive Officer (CEO): Michael Klunbe  
 CEO Daytime Phone: (763)226-0737 CEO Email: mike.klunbe@gmail.com  
(permit will be emailed to this email address unless otherwise indicated below)  
 Email permit to (if other than the CEO): robert.kopff@gmail.com

**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](http://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): River City Extreme  
 Physical Address (do not use P.O. box): 3875 School Blvd  
 Check one:  
 City: Monticello Zip: 55362 County: Wright  
 Township: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_  
 Date(s) of activity (for raffles, indicate the date of the drawing): May 4, 2026

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](http://www.mn.gov/gcb) and click on **Distributors** under the **List of Licensees** tab, or call 651-539-1900.

**LG220 Application for Exempt Permit**

**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: Michael Klumbac Date: 3/16/26  
(Signature must be CEO's signature; designee may not sign)

Print Name: Michael Klumbac

**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 Department 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.

**LG220A Exempt Permit Financial Report**

- By state law, organizations that received an exempt permit (using the LG220 application form) are required to submit a financial report within 30 days of each gambling occasion (Minn. Statutes, section 349.166, subd. 2(a)(6)).
- Complete the information below. Email or mail to the Gambling Control Board within 30 days of the gambling activity date.
- Your organization must keep all exempt raffle records and reports for 3-1/2 years (Minn. Statutes, section 349.166, subd. 2(f)).

**ORGANIZATION INFORMATION**

Organization Name: Wright County Ducks Unlimited Chapter 039  
 Mailing Address: 1004 Ridge Haven Cir City: Buffalo State: MN Zip: 55313  
 Activity Dates: 2/23/26 to 2/23/26 Exempt Permit Number X 86012-26-024  
 Name of premises where the gambling event occurred: American Legion Post 260  
 (For raffles, list the site where the drawing will take place)

**FINANCIAL REPORT**

Activity conducted	Gross receipts for each activity	Expenses, including cost of purchased and cash prizes	Net profit (subtract expenses from gross receipts)	Total Value of Prizes <small>Purchased (full retail value) Donated (full retail value) Cash (total face value of dollars awarded)</small>
Bingo	11,520	3,300	8,220	4,600
Raffle	8,485	1,337	7,148	3,900
Paddlewheel				
Tipboard				
Pull-Tabs				

**DISTRIBUTOR INFORMATION**

If paddlewheels, bingo, tipboards, or pull-tabs are conducted, list the licensed distributor from whom the gambling equipment was purchased.

Distributor: \_\_\_\_\_ Date of Purchase: \_\_\_\_\_

**ACKNOWLEDGMENT OF CHIEF EXECUTIVE OFFICER (CEO)**

I declare that all financial information is true, accurate, and complete.

Print Name of Current CEO: Michael Kloube Phone: (763) 226-0737

Signature of Current CEO: [Signature] Date Signed: 3/12/26

Email: mike.kloube@gmail.com

**MAIL OR EMAIL TO:**

Minnesota Gambling Control Board  
 1711 W County Road B, Suite 300 South  
 Roseville, MN 55113

**EMAIL: [gcb.financialreports@state.mn.us](mailto:gcb.financialreports@state.mn.us)**

**DATA PRIVACY NOTICE:**

The information on this form and any attachments will become public information when received by the Board and will be used to determine your compliance with Minnesota statutes and rules governing lawful gambling activities.

**Questions?** Contact the Licensing Specialist assigned to your county by calling 651-539-1900.