

## AGENDA REPORT

TO: Mayor Pat Humphrey and the City Commission  
FROM: Jeremy Howard, City Manager  
DATE: October 3, 2024  
RE: Charitable Gaming License Resolution – Clare Wrestling Club

For the Agenda of October 7, 2024

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**Background.** The Clare Wrestling Club has requested that the City Commission consider adopting a Resolution enabling them to apply for the issuance of a state Gaming License, thereby allowing their organization to conduct various fund-raising events to support the community wrestling program.

**Issues & Questions Specified.** Should the City Commission approve a Local Governing Body Resolution for Charitable Gaming License for the Clare Wrestling Club?

**Alternatives.**

1. Approve the resolution.
2. Do not approve the resolution.
3. Set aside decision regarding this matter to a later date.

**Financial Impact.** There is no direct fiscal impact for the City.

**Recommendation.** I recommend that the City Commission approve the attached Resolution 2024-075 supporting the Clare Wrestling Club's charitable gaming license submission to the State of Michigan Charitable Gaming Division.

**Attachment.**

1. Resolution 2024-075.



Charitable Gaming Division  
 Box 30023, Lansing, MI 48909  
 OVERNIGHT DELIVERY:  
 101 E. Hillsdale, Lansing MI 48933  
 (517) 335-5780  
 www.michigan.gov/cg

2024-075

**LOCAL GOVERNING BODY RESOLUTION FOR CHARITABLE GAMING LICENSES**  
 (Required by MCL.432.103a(i)(ii))

At a regular meeting of the Clare City Commission  
REGULAR OR SPECIAL TOWNSHIP, CITY, OR VILLAGE COUNCIL/BOARD

called to order by \_\_\_\_\_ on \_\_\_\_\_  
DATE

at \_\_\_\_\_ a.m./p.m. the following resolution was offered:  
TIME

Moved by \_\_\_\_\_ and supported by \_\_\_\_\_

that the request from Clare Wrestling Club of Clare  
NAME OF ORGANIZATION CITY

county of Clare, asking that they be recognized as a  
COUNTY NAME

nonprofit organization operating in the community for the purpose of obtaining charitable

gaming licenses, be considered for approval.  
APPROVAL/DISAPPROVAL

**APPROVAL**  
 Yeas: \_\_\_\_\_  
 Nays: \_\_\_\_\_  
 Absent: \_\_\_\_\_

**DISAPPROVAL**  
 Yeas: \_\_\_\_\_  
 Nays: \_\_\_\_\_  
 Absent: \_\_\_\_\_

I hereby certify that the foregoing is a true and complete copy of a resolution offered and  
 adopted by the Clare City Commission at a regular  
TOWNSHIP, CITY, OR VILLAGE COUNCIL/BOARD REGULAR OR SPECIAL  
 meeting held on \_\_\_\_\_  
DATE

SIGNED: \_\_\_\_\_  
TOWNSHIP, CITY, OR VILLAGE CLERK

Diane M. Lyon, Clare City Clerk  
PRINTED NAME AND TITLE

202 West Fifth Street, Clare, MI 48617  
ADDRESS

COMPLETION: Required.  
 PENALTY: Possible denial of application.  
 BSL-CG-1153(R4/24)