

Alcohol and Gaming Commission of Ontario Gaming Registration & Lotteries 90 Sheppard Avenue East Suite 200 Toronto, ON M2N 0A4 Commission des alcools et des jeux de l'Ontario Inscription pour les jeux et loteries 90, avenue Sheppard Est Bureau 200 Toronto ON M2N 0A4

# Charitable Gaming Report

416 326-8700 1 800 522-2876 toll free in Ontario / sans frais en Ontario

This form must be completed by a licensee conducting a charitable gaming event in a pooling bingo hall and submitted to the Municipal Licensing Authority on a monthly basis.

1.	CONTACT										
	Last Name				First Nam	ie					
	Position					E-mail	l Address				
	Street Address					Teleph	none Num	nber –			
	City	Post	al Code			Facsir	nile Numl	per _			
2.	LICENSEE	•			·						
	Name										_
3.											
	a) Report completed for the month: DD Starting:	MM I .	YY I .	ı	Endinç	1:	DD I .	M I	M	YY I .	
	b) Licence number(s):	1					1 1	<u> </u>	<u> </u>	<u> </u>	
	c) Licence period: DD From:	MM I	YY	1	To	):	DD	M	M	YY	
	d) Number of events conducted for the month:		<u> </u>				<u> </u>		<u> </u>		

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#### 4. ADMINISTRATIVE EXPENSES

List all administrative expenses and licence fees incurred during the licence period.

	AMOUNT (\$)
Total	

**NOTE:** Attach a separate sheet labelled Question 4 if necessary.

#### 5. NET PROCEEDS

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	AMOUNT (\$)
Proceeds received from Hall Charities Association	
Less Total Administrative Expenses - Question 4	
Net Proceeds	

#### 6. SHORTAGES

List any shortages from the conduct and management of charitable gaming events deducted from the proceeds received from the Hall Charities Association during the licence period.

Date	Explanation	AMOUNT (\$)
	Total Shortages	

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DESIGNAL	ESIGNATED LOTTERY TRUST ACCOUNT					
	ame of Financial Institution					
Account Number						
			Opening Balance			
		Deposits				
Date		Item	Amount (\$)			
			Total Deposits			
		Withdrawals				
		Administrative Expe	enses			
Date	Cheque Number/EFT Reference Number	Payee / Purpose	Amount (\$)			
		Use of Proceed	s			
Date	Cheque Number/EFT Reference Number	Payee / Purpose	Amount (\$)			
			Total Withdrawals			
			Interest			
		Discrepancies	(attach a written explanation)			
			Closing Balance			

### 8. USE OF NET PROCEEDS

Total charitable expenditures for uses of proceeds approved on the charitable gaming event licence(s) during the licence period:

\$		

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**NOTE:** Attach a separate sheet labelled Question 7 if necessary.



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## **Declaration**

We, the undersigned, declare that:

- We are bona fide members of the Licensee;
- We have been authorized to file this report on behalf of the Licensee; and
- To the best of our knowledge, all answers provided in this report, as well as all information contained in the documents and materials submitted with it, are true and complete.

Principal Officer		Principal Officer
	Signature	
	Print name	
	Title	
	Date	
( ) –	Telephone Number	( ) –
( ) –	Facsimile Number	( ) –
	E-mail Address	

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