



( 2. Cont'd. )

Date and Time of Draws	CAN \$ Receipts Only	Seed Money	Main Prize	Total
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
<b>Totals:</b>	\$	\$	\$	\$

### 3. Details of Administrative Expenses

Item	Name and Address of Payee	Cost
Premises Rent		\$
Gaming-Related Supplier Fee		\$
Licence Fee		\$
Other (specify)		\$
<b>Total Administrative Expenses:</b>		\$
<b>Net Proceeds Derived:</b>		\$

### 4. Details of Donations

Name of Payee	Address of Payee	Amount Donated
		\$
		\$
		\$
<b>Total value of proceeds actually donated for charitable or religious purposes</b>		\$

**5. Chartered Bank, Loan or Trust Company or Province of Ontario Savings Office in which the Lottery Trust Account is kept.**

Name of Bank	Branch Address	Account Number
<b>Balance of proceeds retained in Lottery Trust Account</b>		<b>\$</b>

### Declaration

We, the undersigned, as two Principal Officers of the \_\_\_\_\_  
 \_\_\_\_\_ Charitable Organization certify that this report is  
 a correct statement of the lottery funds referred to herein.

	Charitable Organization Officer	Charitable Organization Officer
Signature		
Print Name in Full		
Title		
Address		
Business Telephone	(       )       –	(       )       –
Date of Signing		