Signature:

Signature:

Preparer Print Name:

LICENSED ORGANIZATION FINANCIAL REPORT FOR SPECIAL EVENT RAFFLE LICENSE ONLY

NOTE: QUARTERLY REPORTS ARE DUE APRIL 30TH, JULY 31ST, OCTOBER 31ST AND JANUARY 31ST ANNUALLY REPORTS ARE DUE JANUARY 31ST - SEE KRS 238.550(7) & (8)

ANNUALLY	REP	ORTS ARE DUE JANU	ARY	31ST - SEE KRS 238.55	50(7)	& (8)		
License No. SER-			_			Select Qua	rter	
Name of Organization			_		A. Quarterly			
Mailing Address			_			1 2 3 4	Ye	ear
City State Zip			_					
County			_					
_					_	_		
	mn	nary of All Charita	ble	Gaming Receipts	8 &	Payouts		
PART 1 GAMING		GROSS		ALL PAYOUTS BY		PURCHASED		ADJUSTED
ACTIVITY		RECEIPTS		CASH & CHECK		PRIZES		GROSS RECEIPTS
3. Raffles (From Attachment E)	3.		3.		3.		3.	
6. Returned Checks Collected	6.		6.	N/A	6.	N/A	6.	
7. Less: Returned Checks	7.		7.	N/A	7.	N/A	7.	
TOTAL	8.	\$	8.	\$	8.	\$	8.	\$
		•	7					
		\$		FEE DUE = Total Gro	oss I	Receipts x	_	
40% Calculation								
Adjusted Cases Descints /Tuesdays from	Dt	4 Line 0 Calumen 4)		d				
Adjusted Gross Receipts (Transfers from Expenses (Transfers from Part 2 Line 14)	Part	T Line o Column 4)		1			_	
Total Net (Adjusted Gross Receipts Less I	=vnc	maaa)		_			_	
Total Net (Adjusted Gloss Receipts Less I	zxpe	11565)						
Total Net				9	S		_	
Adjusted Gross Receipts				÷			_	
Percentage (Total Net divided by Adjusted	Gro	ss Receipts)		=			_ %	
SIGNATURE AND VERIFICATION								
Under penalty of perjury, I declare that I have	ave e	examined this report incl	udina	any accompanying sch	edule	25		
and attachments, and to the best of my kn		•	_					
Declaration of preparer (other than organize	zatio	n official) is based on all a	availa	able information.				
OFFICER OF ORGANIZATION MUS	ST (SIGN REPORT						
OFFICER OF ORGANIZATION MICE	<u> </u>	DIGIT INEF OILT					T	
CEO or CFO Print Name:					Titl	e:	Da	ite:

dcg.ky.gov

Title:

Date:

Daytime Phone:

Daytime Phone:

icense No. ORG-	CG-FIN
	Part 2
Name of Organization	2018

Summary of All Charitable Gaming Expenses

PART 2

ATTACHMENT A EXPENSES USED IN THE 40% CALCULATION		
1. Gaming Supplies, Equipment, & Bingo Card Minding Device Rental or Purchase		1.
2. Facility Rent		2.
3. Janitorial Services		3.
4. Security		4.
5. Bookkeeping & Accounting Services		5.
6. Advertising & Promotions		6.
7. Bank, Credit Card, Check Verification, & Bad Check Collection Fees		7.
8. Printing		8.
9. Volunteer Food, Clothing & Raffle Sellers Incentive		9.
10. Utilities (Telephone, Electric, Gas, Water, Sewer, Trash)		10.
11. Insurance		11.
12. DCG fines		12.
13. Less Any Sales or Use Tax on Gaming Supplies and Equipment	13. (
(ADD LINE 1 THROUGH 12 AND SUBTRACT LINE 13 AND PLACE TOTAL ON LINE 14)		
TOTAL EXPENSES USED IN 40% CALCULATION		14. \$
ATTACHMENT A EXPENSES NOT USED IN THE 40% CALCULATION		
15. Fees Paid To DCG		15.
16. Purchased Prizes		16.
17. Payment of Prizes Awarded by Check		17.
18. Federal Excise Tax		18.
19. Kentucky State Sales Tax		19.
20. Charitable Contributions		20.
21. Transfers to General Account		21.
22. Start-Up Cash		22.
(ADD LINE 15 THROUGH LINE 22 AND PLACE TOTAL ON LINE 23)		23. \$
TOTAL (ADD LINE 14 AND LINE 23)		24. \$

License No. ORG						CG-FII	N-SER PAGE 3
			CHARITABLE GAM Attach additional co			TION	
Name of Bank: City, State: Account No.					Check	kbook Balance as of End of Previous Quarter \$ Deposits + \$	
AUTHORIZED SI	GNATURES FOR	ACCOUNT (Please Pri	int):			Checks Written - \$ Bank Charges - \$ Returned Checks - \$	
		TitleTitle		i		Other +/- \$ Checkbook Balance as of End of Quarter = \$	
		LISTING OF A	LL ACTIVITY REGARDING			E GAMING ACCOUNT	
Date of Activity	Check No.		Payee	Check Amount	Deposit Amount	Description of Expense/Deposit	t

PAGE TOTAL

License No. ORG-	CG-FIN-SER Page 4
Name of Organization	2018

SUMMARY OF GAMING ACTIVITY - RAFFLES

Attach additional copies of this attachment if necessary

RAFFLE RECEIPTS & PAYOUTS - (Transfers to Part 1, Line 3 of CG-FIN)

Date of	Raffle Gross	Cash		Raffle Cash &	Merchandise Prize	
Drawing	Receipts	(Short)/Over	Total Gross	Check Prizes	Purchase Price	Total Payouts
		TOTAL			TOTAL	

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Name of Organization	2018

REPORT OF CHARITABLE CONTRIBUTIONS MADE TO ORG

Please list below all charitable expenditures from the charitable gaming account made by your organization for charitable endeavors pursuant to KRS 238.550 (5).

Attach additional copies of this attachment if necessary

Date	Check #	Charitable Endeavor (Payee)	Purpose	Street Address/City/State	Amount

·-					CG-FIN-SER Page 6
	REPORT OF ALL WIN	INERS OF PRIZES WITH A Attach additional copies of this		F \$600 OR MORE	
Date of Win	Winner's Name	Winner's Address	Value of Prize	Description of Prize	(If not cash)