Township of Washington
Township Clerk's Office 523
Egg Harbor Road
Sewell, NJ 08080
856-589-0520 Ext. 213
lselb@twp.washington.nj.us

BINGO

This packet has been designed to assist registered organizations with the games of chance process. We have created and gathered forms and samples and simplified instructions for the purpose of streamlining this process.

This package is meant to be used simply as a guide. The State Legalized Games of Chance has full authority over games of chance.

It is important to visit the website for Legalized games of Chance for the most updated and current information. A comprehensive list of links and contact information has been provided on the next page.

Please feel free to contact the Washington Township Clerk's Office for further assistance when applying for games of chance. The office can be reached at (856)589-0520 Ext. 213 or 214 or at e-mail address lselb@twp.washington.nj.us

The Washington Township Website, www.twp.washington.nj.us, contains bingo information for our town as well as fillable forms and applications.

Legalized Games of Chance Control Commission Contact Information and Important Links

Contact Information	
Legalized Games of Chance Phone Number	(973)273-8000
Legalized Games of Chance Mailing Address	PO Box 46000 Newark, NJ 07101
Legalized Games of Chance Physical Address	124 Halsey Street Newark, NJ 07102

Website Links	
Home Page	www.njconsumeraffairs.gov/lgccc/pages/default.aspx
LGCCC Registration Information	http://www.njconsumeraffairs.gov/lgccc/Pages/requestspeaker.aspx
LGCCC Application and Forms	http://www.njconsumeraffairs.gov/lgccc/Pages/applications.aspx
Laws and Regulations	http://www.njconsumeraffairs.gov/lgccc/Pages/regulations.aspx
LGCCC Fees	http://www.njconsumeraffairs.gov/lgccc/Pages/licensefees.aspx
Registered Organizations, Licensed Dealers, Licensed Equipment Providers	http://www.njconsumeraffairs.gov/lgccc/Pages/Registered-Organizations.aspx

Bingo Application

This section contains:

- "Application for a Bingo License" Instructions
- Blank Application for a Bingo License
- Statement of Landlord for Bingo Form 10A
- Declaration of Trust

Application for a Bingo License

Application No. BA_____
Identification No. _____

Submit four (4) copies of this application to the Municipal Clerk's office in the municipality where the games will be conducted.

Please print clearly.

Name of municipality: _____

Part A - General

1. Name of applying organization: _____
2a. Street address of headquarters: _____
b. Mailing address (if different):

3. List date(s) and hours for games:

Date	Hours	Date	Hours

4. Address of place where bingo will be played:

a. Does the applicant own the premises or regularly occupy them for its general purposes? ☐ Yes ☐ No
b. If "No," from whom will the applicant rent the premises?
Name_____ Address_____
c. If premises are to be rented, attach Form 10, "Statement of Landlord."

Part B - Schedule of Expenses

The items of expense intended to be incurred or paid in connection with the games listed in this application, the names and addresses of the persons to whom each item is to be paid, and the purpose for which each item is to be paid, are:

Item of Expense	Name and address of supplier	Purpose

Applications need to be submitted in quadruplicate.
Applications must be originals.

Copies of signature or notary seal will not be accepted

The name of the organization must **match exactly** the name on the Registration card issued from Legalized Games of Chance Control Commission.

Equipment and Premises rented and listed in the schedule of expenses MUST be approved by the Legalized Games of Chance Control Commission

Payment for prizes in a draw raffle must be made PRIOR to the date of drawing

The expenses listed in this section must be goods, wares or merchandise. SERVICES cannot be listed as an expense.

Part C - Schedule of Purposes

1. The specific purpose(s) to which the entire net proceeds of the games listed in this application are to be devoted, and the manner in which they are to be so devoted, are:

2. If any part of the net proceeds are to be devoted to a purpose allowed by the Bingo Licensing Law by turning the same over to another organization which is exclusively devoted to such purposes, secure the signature of its president or other executive officer to the following certificate:

"It is hereby certified that _____
Name of organization

will accept from the licensee any part of the net proceeds of the games listed in this application to be turned over to it."

Date: _____ Signature: _____

Part D - Schedule of Prizes

A description of all prizes to be offered and given in all of the games listed in this application is as follows. (For cash prizes, state the amount; for merchandise, describe the article and state the retail value; if prizes are to be donated, indicate that fact and estimate as accurately as possible the information requested below.)

Description of Prize Amount (for cash prizes) or Article (Additionally, please attach a schedule of the games to be conducted.)	Retail value

The description of prizes must be listed in this section. This can vary from merchandise to "50% of the proceeds collected"

It is very important to make sure the prizes you are offering are not prohibited by the Legalized Games of Chance Control Commission to be awarded during games of chance.

Please review prohibited prizes

This is where you should note the **ANTICIPATED** value of the prizes.

The amount due for each game of chance is dependent on the anticipated and actual retail value of prizes awarded.

If no amount is put in this space, the Legalized Games of Chance Control Commission will assume the highest value for fee purposes.

Part E - Officers of Applicant

Office	Name of officer	Residence address	Age

Part F - Members of Applicant who will be in charge of the games

Name of member in charge	Residence address	Telephone No. (include area code)	Age

Part G - Members of Applicant who will assist in conducting the games

Name of member	Residence address	Age

Part H - Names of other organizations whose members will assist in conducting the games

Name and address of organization	How related	Identification No.

If more space is needed in any section of this application, insert extra sheets of paper.

continue ➡

Please make sure to write in all officers of the organization who owns the Legalized Games of Chance Control Commission Registration Card

It is helpful to make a note of the best point of contact on this sheet. That way if the State or the Municipality must reach the organization, it can be done with ease and in a timely manner.

The members listed in this section are responsible for the application, reports, handling, etc. of the games.

Their information should be listed in order of best contact.

They may be duplicative of those members listed as officers.

The members listed in the section will be responsible for actually conducting the game when it is held.

They should be listed in order of best contact.

They may be duplicative of those members listed as officers

This section is to be used if more than one organization will be assisting in the conduct of the game.

They must be a registered organization with the Legalized Games of Chance Control Commission.

Part I - Statement of Applicant and member(s) in charge

State of New Jersey

} ss.

County of _____

We do hereby each make the following statement, under oath, with respect to the foregoing application:

1. The applicant (is) (is not) limited in its activities to the furtherance of one or more authorized purposes as defined in the Bingo Licensing Law.
2. Prior to the issuance of any license to it to conduct games of chance, the applicant was actively engaged in serving one or more "authorized purposes."
3. The applicant has received and used, and in good faith expects to continue to receive and use, to further one or more authorized purposes, funds from sources other than games of chance.
4. The conduct of the games on the occasion or occasions for which this application is made will be to raise and devote the entire net proceeds to the authorized purpose described in the application.
5. For each occasion for which a license is sought, one or more of the members listed who are familiar with the Bingo Licensing Law and the Rules and Regulations, will be in full charge of, and primarily responsible for, the conduct of the games.
6. No commission, salary, compensation, reward or recompense will be paid to any person for holding, operating or conducting or assisting in the holding, operation or conducting, of the games, except to bookkeepers or accountants for professional services not exceeding the amounts fixed by the Schedule of Fees, as well as the compensation for the Licensed Compensated Workers pursuant to N.J.A.C. 13:47-6A. All prizes offered for games conducted on a single occasion will not exceed the limit on the sum or retail value of prizes as provided by the Bingo Licensing Law (N.J.S.A. 5:8-25 et seq.) and N.J.A.C. 13:47-6.16 and 13:47-7.2.
7. All statements in the foregoing application are true.

Sworn and subscribed to before me this

_____ day of _____ , 20 ___.

Notary Public (Print name)

Signature of Notary Public

AFFIX SEAL HERE

Signature of Officer and Title

Signature of Member-in-Charge

Signature of Member-in-Charge

Signature of Member-in-Charge

Signature of Member-in-Charge

If more space is needed in any section of this application, insert extra sheets of paper.

Applicant's registration slip from the *Legalized Games of Chance Control Commission* must be presented to the Municipal Clerk with this application.

All four (4) applications submitted for each game of chance must have original Notary Seal and information.

Copies of this page WILL NOT be accepted!

An officer that was named in the previous section MUST sign this section and note their title. **(Part E)**

The signature of the officer signifies that the application can use the registration from the Legalized Games of Chance Control Commission.

The members listed as being in charge of the raffle should **ALL** sign in this section. **(Part G)**

Those members listed as in charge are signing off on the statement of compliance with all statutes and guidelines for games of chance.

Application for a Bingo License

Application No. ***BA***_____
Identification No. _____

Submit four (4) copies of this application to the Municipal Clerk's office in the municipality where the games will be conducted.

Please print clearly.

Name of municipality: _____

Part A - General

1. Name of applying organization: _____

2a. Street address of headquarters: _____

b. Mailing address (if different):

3. List date(s) and hours for games:

Date	Hours	Date	Hours

4. Address of place where bingo will be played:

a. Does the applicant own the premises or regularly occupy them for its general purposes? ☐ Yes ☐ No

b. If "No," from whom will the applicant rent the premises?

Name _____ Address _____

c. If premises are to be rented, attach Form 10, "Statement of Landlord."

Part B - Schedule of Expenses

The items of expense intended to be incurred or paid in connection with the games listed in this application, the names and addresses of the persons to whom each item is to be paid, and the purpose for which each item is to be paid, are:

Item of Expense	Name and address of supplier	Purpose

Part C - Schedule of Purposes

1. The specific purpose(s) to which the entire net proceeds of the games listed in this application are to be devoted, and the manner in which they are to be so devoted, are:

2. If any part of the net proceeds are to be devoted to a purpose allowed by the Bingo Licensing Law by turning the same over to another organization which is exclusively devoted to such purposes, secure the signature of its president or other executive officer to the following certificate:

   "It is hereby certified that ______________________________
   Name of organization

   will accept from the licensee any part of the net proceeds of the games listed in this application to be turned over to it."

   Date: ____________________ Signature: ____________________

Part D - Schedule of Prizes

A description of all prizes to be offered and given in all of the games listed in this application is as follows. (For cash prizes, state the amount; for merchandise, describe the article and state the retail value; if prizes are to be donated, indicate that fact and estimate as accurately as possible the information requested below.)

Description of Prize Amount (for cash prizes) or Article (Additionally, please attach a schedule of the games to be conducted.)	**Retail value**

Part E - Officers of Applicant

Office	Name of officer	Residence address	Age

Part F - Members of Applicant who will be in charge of the games

Name of member in charge	Residence address	Telephone No. (include area code)	Age

Part G - Members of Applicant who will assist in conducting the games

Name of member	Residence address	Age

Part H - Names of other organizations whose members will assist in conducting the games

Name and address of organization	How related	Identification No.

If more space is needed in any section of this application, insert extra sheets of paper.

continue ➡

Part I - Statement of Applicant and member(s) in charge

State of New Jersey

} ***ss.***

County of _____

We do hereby each make the following statement, under oath, with respect to the foregoing application:

1. The applicant (is) (is not) limited in its activities to the furtherance of one or more authorized purposes as defined in the Bingo Licensing Law.
2. Prior to the issuance of any license to it to conduct games of chance, the applicant was actively engaged in serving one or more "authorized purposes."
3. The applicant has received and used, and in good faith expects to continue to receive and use, to further one or more authorized purposes, funds from sources other than games of chance.
4. The conduct of the games on the occasion or occasions for which this application is made will be to raise and devote the entire net proceeds to the authorized purpose described in the application.
5. For each occasion for which a license is sought, one or more of the members listed who are familiar with the Bingo Licensing Law and the Rules and Regulations, will be in full charge of, and primarily responsible for, the conduct of the games.
6. No commission, salary, compensation, reward or recompense will be paid to any person for holding, operating or conducting or assisting in the holding, operation or conducting, of the games, except to bookkeepers or accountants for professional services not exceeding the amounts fixed by the Schedule of Fees, as well as the compensation for the Licensed Compensated Workers pursuant to N.J.A.C. 13:47-6A. All prizes offered for games conducted on a single occasion will not exceed the limit on the sum or retail value of prizes as provided by the Bingo Licensing Law (N.J.S.A. 5:8-25 et seq.) and N.J.A.C. 13:47-6.16 and 13:47-7.2.
7. All statements in the foregoing application are true.

Sworn and subscribed to before me this

_____day of _____ , 20 ___.

_____
Notary Public (Print name)

_____
Signature of Notary Public

AFFIX SEAL HERE

_____
Signature of Officer and Title

_____
Signature of Member-in-Charge

_____
Signature of Member-in-Charge

_____
Signature of Member-in-Charge

_____
Signature of Member-in-Charge

If more space is needed in any section of this application, insert extra sheets of paper.

Applicant's registration slip from the *Legalized Games of Chance Control Commission* must be presented to the Municipal Clerk with this application.

LGCCC Form 10-A

STATEMENT OF LANDLORD

(To be attached to each copy of Bingo Application where the premises are rented)

_____

Name of the organization to conduct bingo

_____

Address Identification No.

State of New Jersey

:§

County of

I _____, being duly sworn on my oath depose and say that:

1. I am an authorized officer, namely the _____ of _____, in which the lessor of the premises to be rented, described in the annexed application.

2. The address of the lessor is:

3. The rent to be charged and paid for the premises is $ _____ for each occasion, including facilities, fixtures and equipment.

4. (Complete the applicable clause)

   A. The lessor is licensed to conduct bingo holding License No. _____ issued by the Governing Body of _____

   B. The lessor is licensed as a rentor holding License No. _____

5. The rental to be charged and paid is reasonable and is not in excess of the rental ordinarily charged for the use of the premises other than for games of chance.

6. I understand that no charge may be made on a percentage basis, or according to the number of persons attending, and that bingo equipment may not be leased for a charge.

7. There is attached to this statement a copy of the Lease Agreement.

_____

Sworn & Subscribed before me

this _____ day of _____, _____

_____

Signature of Notary Public

State of New Jersey
Department of Law and Public Safety
Division of Consumer Affairs
Legalized Games of Chance Control Commission
124 Halsey St., 6th Floor, P.O. Box 46000
Newark, NJ 07101
(973) 273-8000
WWW.NJ.GOV/LPS/CA/LGCCC.HTM

DECLARATION OF TRUST

_____ an organization qualified to conduct games of chance under the Bingo and Raffles Licensing Law in the State of New Jersey and registered with the Control Commission with the Identification Number _____, hereby declares that all funds that it receives from the rental of its premises for the conduct of bingo games will be devoted to purposes authorized by the Bingo Licensing Law.

STATE OF NEW JERSEY

COUNTY OF

Be it remembered on this _____ day of _____, 20_____, before me the subscribed, by _____ personally appeared, who being by me duly sworn/affirmed on his oath says that he is the _____ _____; that he well knows the corporate seal of said _____: that the said seal affixed to this instrument is the corporate seal of said _____; that this seal is so affixed and the instrument signed by him as his voluntary act and deed as and the voluntary act and deed of t the _____.

_____
A Notary Public State of New Jersey

Bingo Application Support

This section contains:

- How To Determine What to Charge for Bingo
- Sample Game Directions
- Sample Cards
- Where to Find Equipment Providers NJ State Approved ONLY!
- Tie Breaker Regulations

How to Determine to Charge for Playing Pocketbook Bingo

1. The cost of admission to play includes at least 1 face on each game card. A face is the actual bingo pattern where the numbers are printed to be matched when called. After the charge of admission, the cost of additional faces on the game card cost up $1.00 per face.

2. How many games?

   Normally 8 to 10

3. How many faces on each game sheet?

   Usually each game has normally four faces. This gives the person four chances to win at the Game

4. Each game card is usually a different color. All can be the same or some can have a pattern that must be matched.

5. How do I determine the final cost to play Bingo ?

   Example if you play 8 games on every card the first face is paid for with the price of the admission. So, if there are 8 games then the first 8 faces are paid for with the admission, i.e. $1.00 or $5.00 admission.

   You charge $5.00 for admission, and if you have four faces on each game card, then each card contains 3 extra faces (Chances to win) and you can charge up to a $1.00 per face. Where there are 8 games then there would be an additional 3 x 8 faces equal to 24 faces. The 24 faces(chances) to win would cost $24.00. The total cost to play all 8 games and 32 faces would then be :

Admission of $5.00 for one face on each of the 8 games	$5.00
Cost for each additional face $1.00, and there are 3 additional faces on each game for 3 faces on 8 games or 24 faces at $1.00 each	$24.00
Cost to play all games	$29.00

SAMPLE

ID # License #

COACH BAG BINGO

Admission is $5.00, which entitles the player to the first bingo game. Special books are available for $20.00 and include the admission for the 1st regular bingo game.
Or you could say:
$20.00 for one book containing all of the merchandise bingo games, including our $1.00 admission which includes the 1st Regular Bingo Game. If a player wishes to purchase the regular bingo game the admission for that regular game is $1.00.

The 50/50 bingo special (Game # 6) are $1.00 a sheet.

BINGO GAME SCHEDULE -

Game # 1 - Double Bingo on one square (Blue)	Wristlet (retail value - $50)
Game # 2 - Special - Letter X (Green)	Coach Bag (retail value - $200)
Game # 3 - Special - Letter H (Brown)	Coach Bag (retail value - $300)
Game # 4 - Special - Lucky 7 (Pink)	Coach Bag (retail value - $300)

10 MINUTE INTERMISSION - Refreshment are available in the Auditorium

Last call for Bingo 50/50 sales

Game # 5 - Special - Outside Round Robin (Purple)	Coach Bag (retail value - $200)
Game # 6 - 50/50 Bingo Special TBA (Orange)	50% of Proceeds
Game # 7 - Special - Butterfly (Teal)	Coach Bag (retail value - $400)
Game # 8 - Special - Full Board (Yellow)	Coach Bag (retail value - $200)

*** IN THE EVENT OF A TIE BREAKER THE PRIZE MUST BE DIVIDED AS EQUALLY AS POSSIBLE. EITHER MULTIPLE PRIZES THAT ARE IF LESSOR VALUE OR SPLITTING THE CASH VALUE (if a prize has a retail value of $300.00 a cash prize may be distributed among the winners)**

No reserved seating.

If you or someone you know have a gambling problem, please call 1-800-GAMBLER

YOU NEED TO LIST THE WORDING ABOVE FOR A TIE BREAKER

ALL BINGO PRIZES CANNOT TOTAL OVER $3,000 IN BAG BINGO

Designer Handbag Bingo *SAMPLE*

16 Games

If more than one player is found to be the winner on a call of the same number in the same bingo game, each winner shall be given a prize as equally valued as possible. There will be no runner up prizes.

Game 1 — Blue Card

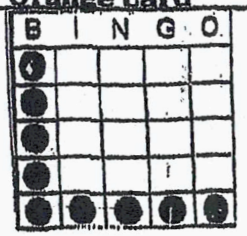
Regular Bingo (Any Direction)



This is what is called a Face.

Game 2 — Orange Card

Letter L



Game 3 — Green Card

Regular Bingo (Any Direction)



Game 4 — Yellow Card

Layer Cake



Game 5 — Pink Card

Regular Bingo (Any Direction)



Game 6 — Grey Card

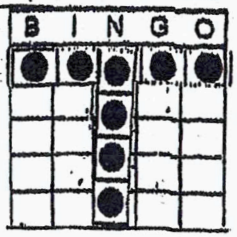
Regular Bingo (Any Direction)



Game 7 (50/50 Game) — White Card

50/50 Game

Letter T

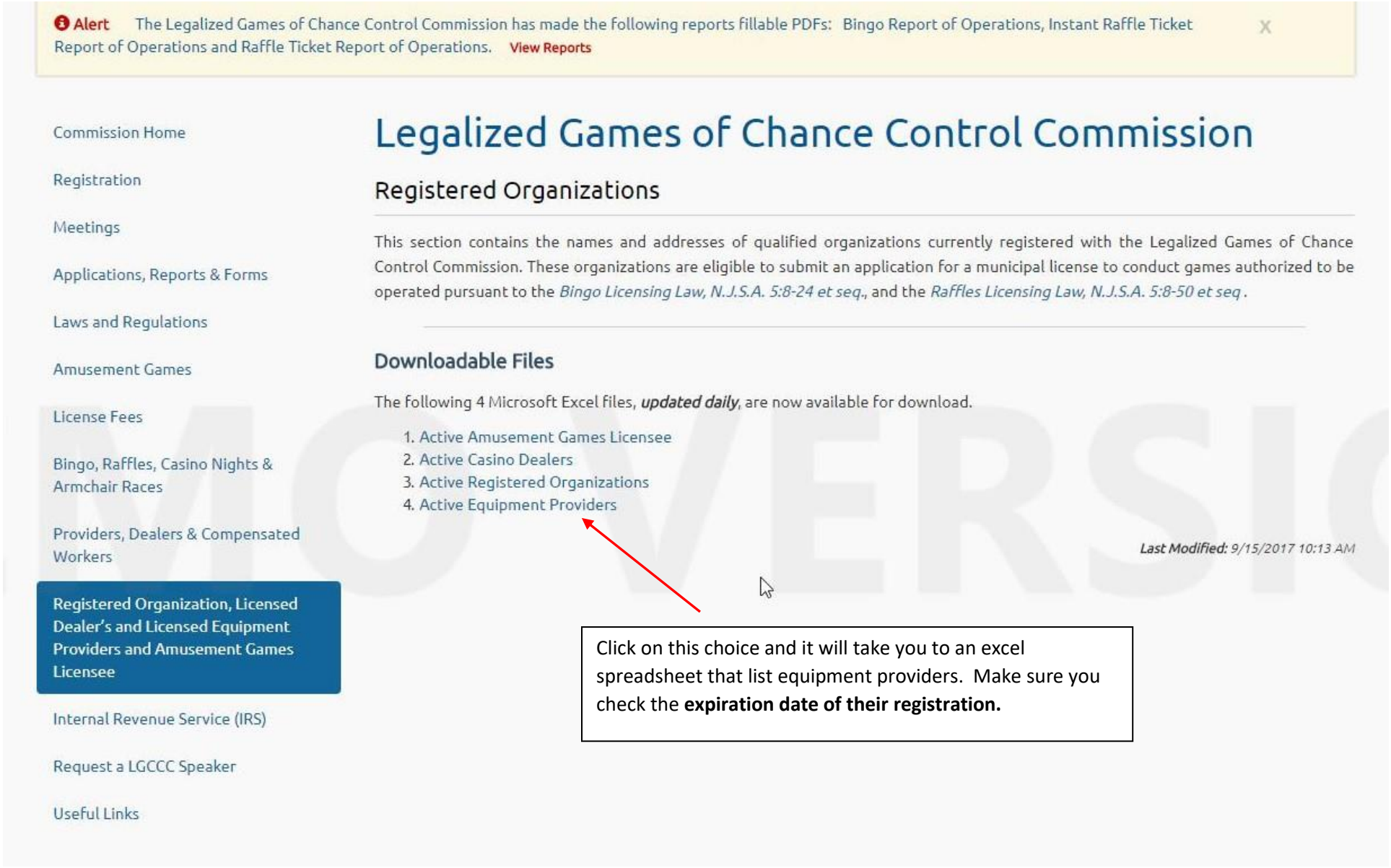


Game 8 — Brown Card

Regular Bingo (Any Direction)



Go to http://www.njconsumeraffairs.gov/lgccc/Pages/Registered-Organizations.aspx and you will find below. Click on Active Equipment Providers to make sure they are still licensed by the State. **THESE ARE THE ONLY ORGANIZATIONS THAT ARE PERMITTED TO PROVIDE EQUIPMENT BY THE STATE OF NJ.**



CHRIS CHRISTIE
Governor

KIM GUADAGNO
Lt. Governor

New Jersey Office of the Attorney General

Division of Consumer Affairs
Legalized Games of Chance Control Commission
124 Halsey Street, 6th Floor, Newark, NJ 07102

JEFFREY S. CHIESA
Attorney General

SHARON M. JOYCE
Acting Director

Mailing Address:
P.O. Box 46000
Newark, NJ 07101
(973) 273-8000

Regulations concerning tiebreakers.

N.J.A.C. 13:47-7.6 states: "When more than one player is found to be the winner on the call of the same number in the same game, the designated prize shall be divided as equally as possible: and when division is not possible, substitute prizes, whose aggregate value shall not exceed that of the designated prize, shall be awarded, but such substitute prizes shall be of equal value to each other.

Bingo Application Amendment

This section contains:

- Bingo Amendment Instructions
- Bingo Amendment Form

Application to Amend a ☐ Bingo ☐ Raffles License

(Please check one.)

Submit four (4) copies of this application to the Municipal Clerk's office in the municipality where the games will be conducted. One copy will be returned.

License No. _____

Identification No. _____

Please print clearly.

Name of municipality: _____

Name of applicant: _____

Address: _____

Street address City State ZIP code

1. Application is made to amend the above license as follows:

2. Additional proofs, signatures and verifications required for this amendment are attached.
3. If this amendment is permitted, the original license will be returned in exchange for the amended license.

Date: _____ Signature of officer: _____

The statement on the reverse side must be signed and notarized.

Applications need to be submitted in quadruplicate.
Applications must be originals.

Copies of signature or notary seal will not be accepted

This is the license number provided by the municipality where the application was submitted. This number MUST be on the application to amend or the LGCCC will deny the application.

This is the identification number listed on the registration card issued by the LGCCC. The registration must be valid through the date of the amended application, or the application will be denied.

The name of the organization must **match exactly** the name on the Registration card issued from Legalized Games of Chance Control Commission.

Describe the change you wish to make to the application previously submitted.

This can include, but is not limited to, date, time, location.

Please make sure to be specific as to what was on the original application and what the desired change is.

Statement of Applicant and Member(s) in Charge

State of New Jersey

} ss.

County of _____

We do hereby each make the following statement, under oath, with respect to the foregoing application:

1. The applicant (is) (is not) limited in its activities to the furtherance of one or more authorized purposes as defined in the Bingo Licensing Law or the Raffles Licensing Law.
2. Prior to the issuance of any license to it to conduct games of chance the applicant was actively engaged in this State in serving one or more "authorized purposes."
3. The applicant has received and used, and in good faith expects to continue to receive and use, to further one or more authorized purposes, funds from sources other than games of chance.
4. The conduct of the games on the occasion or occasions for which this application is made will be to raise and devote the entire net proceeds to the authorized purpose described in the application.
5. For each occasion for which a license is sought, one or more of the members listed who are familiar with the Bingo Licensing Law or the Raffles Licensing Law, as the case may be, and the Rules and Regulations, will be in full charge of, and primarily responsible for, the conduct of the games.
6. No commission, salary, compensation, reward or recompense will be paid to any person for holding, operating or conducting or assisting in the holding, operation or conducting, or assisting in the holding, operation or conducting, of the games; except to bookkeepers or accountants for professional services not exceeding the amounts fixed by the Schedule of Fees. No prize greater in amount or retail value than authorized by law will be awarded in any single game.
7. All statements in the foregoing application are true.

Sworn and subscribed to before me this

_____ day of _____ , 20 ___.

Notary Public (Print name)

Signature of Notary Public

AFFIX SEAL HERE

Signature of Officer and Title

Signature of Member-in-Charge

Signature of Member-in-Charge

Signature of Member-in-Charge

Signature of Member-in-Charge

If more space is needed in any section of this application, insert extra sheets of paper.

All four (4) applications submitted for each game of chance must have original Notary Seal and information.

<u>Copies of this page WILL NOT be accepted!</u>

An officer that was named in the previous section MUST sign this section and note their title. **(Part E of Original Application)**

The signature of the officer signifies that the application can use the registration from the Legalized Games of Chance Control Commission.

The members listed as being in charge of the raffle should **ALL** sign in this section. **(Part G of Original Application)**

Those members listed as in charge are signing off on the statement of compliance with all statutes and guidelines for games of chance.

Application to Amend a ☐ Bingo ☐ Raffles License

(Please check one.)

Submit four (4) copies of this application to the Municipal Clerk's office in the municipality where the games will be conducted. One copy will be returned.

License No. _____

Identification No. _____

Please print clearly.

Name of municipality: _____

Name of applicant: _____

Address: _____

Street address City State ZIP code

1. Application is made to amend the above license as follows:

2. Additional proofs, signatures and verifications required for this amendment are attached.
3. If this amendment is permitted, the original license will be returned in exchange for the amended license.

Date: _____ Signature of officer: _____

The statement on the reverse side must be signed and notarized.

Statement of Applicant and Member(s) in Charge

State of New Jersey

} ***ss.***

County of _____

We do hereby each make the following statement, under oath, with respect to the foregoing application:

1. The applicant (is) (is not) limited in its activities to the furtherance of one or more authorized purposes as defined in the Bingo Licensing Law or the Raffles Licensing Law.
2. Prior to the issuance of any license to it to conduct games of chance the applicant was actively engaged in this State in serving one or more "authorized purposes."
3. The applicant has received and used, and in good faith expects to continue to receive and use, to further one or more authorized purposes, funds from sources other than games of chance.
4. The conduct of the games on the occasion or occasions for which this application is made will be to raise and devote the entire net proceeds to the authorized purpose described in the application.
5. For each occasion for which a license is sought, one or more of the members listed who are familiar with the Bingo Licensing Law or the Raffles Licensing Law, as the case may be, and the Rules and Regulations, will be in full charge of, and primarily responsible for, the conduct of the games.
6. No commission, salary, compensation, reward or recompense will be paid to any person for holding, operating or conducting or assisting in the holding, operation or conducting, or assisting in the holding, operation or conducting, of the games; except to bookkeepers or accountants for professional services not exceeding the amounts fixed by the Schedule of Fees. No prize greater in amount or retail value than authorized by law will be awarded in any single game.
7. All statements in the foregoing application are true.

Sworn and subscribed to before me this

_____day of _____ , 20 ___.

_____
Notary Public (Print name)

_____
Signature of Notary Public

AFFIX SEAL HERE

_____
Signature of Officer and Title

_____
Signature of Member-in-Charge

_____
Signature of Member-in-Charge

_____
Signature of Member-in-Charge

_____
Signature of Member-in-Charge

If more space is needed in any section of this application, insert extra sheets of paper.

Report of Operations

Reports of Operation must be submitted on the 15th day of the calendar month immediately following the date of the licensed activity.

Failure to file this report on time will result in future games being denied by the State Legalized Games of Chance Control Commission.

This section includes:

- Report of Operations for Bingo

New Jersey Office of Attorney General
Division of Consumer Affairs
Legalized Games of Chance Control Commission
124 Halsey Street, 6th Floor, P.O. Box 46000
Newark, New Jersey 07101
(973) 273-8000

Instructions for Filing the Bingo Report of Operations

Pursuant to N.J.A.C. 13:47-9.1, licensees are to file a report of operations with the Legalized Games of Chance Control Commission ("Commission") no later than the 15th day of the calendar month immediately following the calendar month in which the licensed activity was held, operated or conducted.

You may download this report and complete ALL of the entries for each occasion(s) relating to the conduct of bingo. Once completed, a member/officer shall certify that he/she has reviewed the report and that the information provided is true, accurate and complete. This will require the person to state his/her name and title, and sign the document before a notary public.

Bingo Report of Operations completed must be mailed to the Legalized Games of Chance Control Commission, P.O. Box 46000, Newark, New Jersey 07101.

However, for your convenience, we offer the ability to file reports electronically via e-mail. To employ this option, you must do a "SAVE AS" of the report, and place it onto your personal computer. Complete the report by using the "TAB" key to maneuver through each field.

Upon completion, the member/officer shall certify by placing a check in the box provided, that he/she has reviewed the report and that the information provided is true, accurate and complete. Subsequently, the person must state his/her name and title. Reports that are not properly certified will be sent or e-mailed back.

Bingo Report of Operations completed online must be e-mailed to the Commission at PetermanA@dca.lps.state.nj.us .

It is recommended that you maintain a copy of all reports as part of the organization's records.

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Bingo Report of Operations

Please print clearly. Identification number Type of Raffle to be held

Municipality _____ License number _____

Name of licensee _____
Organization

_____
Street address City State ZIP code

Location of games _____

This report, as required by N.J.S.A. 5:8-37 and N.J.A.C. 13:47-9, must be filed with the Legalized Games of Chance Control Commission no later than the 15th day of the month following the conduct of the game(s) of chance.

Occasion 1 Date _____ Time _____ Number of players _____

1. Regular games sales	$ _____	9. Regular games payout	$ _____	16. Rentals	$_____
2. Special games sales	$ _____	10. Special games payout	$ _____	17. Supplies/equip.	$_____
3. 50/50 Bingo games sales	$ _____	11. 50/50 Bingo games payout	$ _____	18. Comp. Workers	$_____
4. Multicolor games sales	$ _____	12. Multicolor games payout	$ _____	19. Total expenses	$_____
5. Progressive games sales	$ _____	13. Progressive jackpot/cons.	$ _____		
6. Predraw games sales	$ _____	14. Predraw payout	$ _____		
7. Electronic hand-held sales	$ _____				
Adm. cards	$ _____				
8. Total sales	$ _____	15. Total payout	$ _____	20. Net proceeds	$_____

Occasion 2 Date _____ Time _____ Number of players _____

1. Regular games sales	$ _____	9. Regular games payout	$ _____	16. Rentals	$_____
2. Special games sales	$ _____	10. Special games payout	$ _____	17. Supplies/equip.	$_____
3. 50/50 Bingo games sales	$ _____	11. 50/50 Bingo games payout	$ _____	18. Comp. Workers	$_____
4. Multicolor games sales	$ _____	12. Multicolor games payout	$ _____	19. Total expenses	$_____
5. Progressive games sales	$ _____	13. Progressive jackpot/cons.	$ _____		
6. Predraw games sales	$ _____	14. Predraw payout	$ _____		
7. Electronic hand-held sales	$ _____				
Adm. cards	$ _____				
8. Total sales	$ _____	15. Total payout	$ _____	20. Net proceeds	$_____

Occasion 3 Date _____ Time _____ Number of players _____

1. Regular games sales	$ _____	9. Regular games payout	$ _____	16. Rentals	$_____
2. Special games sales	$ _____	10. Special games payout	$ _____	17. Supplies/equip.	$_____
3. 50/50 Bingo games sales	$ _____	11. 50/50 Bingo games payout	$ _____	18. Comp. Workers	$_____
4. Multicolor games sales	$ _____	12. Multicolor games payout	$ _____	19. Total expenses	$_____
5. Progressive games sales	$ _____	13. Progressive jackpot/cons.	$ _____		
6. Predraw games sales	$ _____	14. Predraw payout	$ _____		
7. Electronic hand-held sales	$ _____				
Adm. cards	$ _____				
8. Total sales	$ _____	15. Total payout	$ _____	20. Net proceeds	$_____

Occasion 4 Date_____ Time _____ Number of players _____

1. Regular games sales	$ _____	9. Regular games payout	$ _____	16. Rentals	$_____
2. Special games sales	$ _____	10. Special games payout	$ _____	17. Supplies/equip.	$_____
3. 50/50 Bingo games sales	$ _____	11. 50/50 Bingo games payout	$ _____	18. Comp. Workers	$_____
4. Multicolor games sales	$ _____	12. Multicolor games payout	$ _____	19. Total expenses	$_____
5. Progressive games sales	$ _____	13. Progressive jackpot/cons.	$ _____		
6. Predraw games sales	$ _____	14. Predraw payout	$ _____		
7. Electronic hand-held sales	$ _____				
Adm. cards	$ _____				
8. Total sales	$ _____	15. Total payout	$ _____	20. Net proceeds	$_____

Occasion 5 Date_____ Time _____ Number of players _____

1. Regular games sales	$ _____	9. Regular games payout	$ _____	16. Rentals	$_____
2. Special games sales	$ _____	10. Special games payout	$ _____	17. Supplies/equip.	$_____
3. 50/50 Bingo games sales	$ _____	11. 50/50 Bingo games payout	$ _____	18. Comp. Workers	$_____
4. Multicolor games sales	$ _____	12. Multicolor games payout	$ _____	19. Total expenses	$_____
5. Progressive games sales	$ _____	13. Progressive jackpot/cons.	$ _____		
6. Predraw games sales	$ _____	14. Predraw payout	$ _____		
7. Electronic hand-held sales	$ _____				
Adm. cards	$ _____				
8. Total sales	$ _____	15. Total payout	$ _____	20. Net proceeds	$_____

Occasion 6 Date_____ Time _____ Number of players _____

1. Regular games sales	$ _____	9. Regular games payout	$ _____	16. Rentals	$_____
2. Special games sales	$ _____	10. Special games payout	$ _____	17. Supplies/equip.	$_____
3. 50/50 Bingo games sales	$ _____	11. 50/50 Bingo games payout	$ _____	18. Comp. Workers	$_____
4. Multicolor games sales	$ _____	12. Multicolor games payout	$ _____	19. Total expenses	$_____
5. Progressive games sales	$ _____	13. Progressive jackpot/cons.	$ _____		
6. Predraw games sales	$ _____	14. Predraw payout	$ _____		
7. Electronic hand-held sales	$ _____				
Adm. cards	$ _____				
8. Total sales	$ _____	15. Total payout	$ _____	20. Net proceeds	$_____

Schedule of Expenses

Date	Description	Check number	Amount

Utilization of Net Proceeds

Date	Description	Check number	Amount

Bank

Name	Address where balance is deposited	Account number

Person Responsible for Use of Proceeds

Name	Address	Telephone number (include area code)

I certify that all of the statements on this report of operations are true, accurate and complete. I am aware that if any of the foregoing statements are willfully false, I am subject to punishment. Facts stated on this report are regarded as if made under oath.

N.J.S.A. 5:8-37 "It shall be the duty of each licensee to maintain and keep such books and records as may be necessary to substantiate the particulars of each such report."

I certify that I have reviewed this report and that the information on this report of operations is true, accurate and complete. I am aware that if any of the foregoing statements are willfully false, I am subject to punishment.

*I **certify** by placing a check in this ☐ box, that I have reviewed the report and that the information provided is true, accurate and complete.*

You must state your name and title below. Reports that are not properly certified will be sent or e-mailed back.

_____ _____

Name and title of officer (please print) Signature of officer

Sworn and subscribed to before me this _____

day of _____ , _____

Month Year

_____

Name of Notary Public (please print)

_____

Signature of Notary Public

Affix Seal Here