



Raffle Financial Report

Licence Valid From: _____
 To: (Final Draw Date): _____
 **This information is found on your licence.

Licence #: _____
 Org. Name: _____
 Address: _____

TICKETS PRINTED											
TICKETS UNSOLD											
TICKETS SOLD											
# OF TICKETS PER PRICE POINT***											
SELLING PRICE						TOTAL GROSS REVENUE					
TOTAL						G \$					
***Example: If you offered a price point of 3 tickets for \$5.00, then "3" is the # of tickets and "\$5.00" is the Selling Price. If you sold 1 ticket for \$2.00, the # of tickets is "1".						H \$					
						Total of all Raffle Revenue Deposits in the Lottery Account:					
						Difference: (Cash Short/Over):					
						\$					
						Licence Fee (1.0% of Total Gross Revenue):					

This report is to be submitted to the LGCA within 60 days of the final draw date. The licence fee cheque should be made payable to the "Liquor, Gaming and Cannabis Authority of Manitoba" and is due with the report.

NET PROFIT DISTRIBUTION:

As stated in the Raffle Terms and Conditions, profits must be disbursed within 60 days after the final draw date. If profits are not disbursed within this time frame, an additional follow up report is required and will be provided by the Audit Department.

If the above applies to your organization, please complete the following:

Anticipated date of full profit disbursement: _____

If your organization has applied for and received approval to retain the profits from this Raffle for a Building Fund, or other long term project, annual reports will be required until such time as the project is completed.

If the above applies to your organization, please complete the following:

Annual Raffle Report Submission Date: _____

LOTTERY ACCOUNT CHEQUE REGISTER

Enter all cheques issued and pre-authorized payments made during the period being reported.

DATE	CK#	PAYEE (PAID TO)	DESCRIPTION (PURPOSE)	RAFFLE PRIZES PAID BY CHEQUE	USE OF PROFIT (DISBURSEMENTS & DONATIONS)	RAFFLE EXPENSES						
						RAFFLE TICKET PRINTING	WAGES	ADVERTISING	LICENCE FEE	SELLERS PRIZES	OTHER RAFFLE EXPENSES	
Grand Totals*				L	M	\$	\$	\$	\$	\$	\$	N
											TOTAL RAFFLE EXPENSES	

*Grand totals must be provided for all columns

BANK SUMMARY STATEMENT

1. OPENING LOTTERY BANK BALANCE AT THE BEGINNING OF THIS LICENCE: <small>("LICENCE VALID FROM" DATE OR LINE 9 FROM LAST REPORT)</small>	1. \$ _____
2. REVENUE: (Box G, Page1)	2. \$ _____
3. TOTAL PRIZES: (Box L, Page 2)	3. \$(_____)
4. TOTAL EXPENSES: (Box N, Page 2)	4. \$(_____)
5. USE OF PROFIT/DISBURSEMENTS: (Box M, Page 2)	5. \$(_____)
6. OTHER WITHDRAWALS:	
<small>DESCRIPTION</small> BANK CHARGES _____	<small>AMOUNT</small> _____
_____	_____
	= _____
	6. \$(_____)
7. OTHER RECEIPTS:	
INTEREST _____	_____
_____	_____
	= _____
	7. \$ _____
8. CALCULATED ENDING BANK BALANCE (Lines 1 + 2 - 3 - 4 - 5 - 6 + 7)	8. \$ _____
9. ACTUAL ADJUSTED BANK BALANCE (Box O, page 3)	9. \$ _____
10. SHORTAGE/(OVERAGE) (LINE 9 - 8)	10. \$ _____

CERTIFICATION

WE, the undersigned, have examined the records and accounts of _____

(NAME OF ORGANIZATION)

with respect to the above described lottery, the information contained herein accurately reflects the organization's records which are correct to the best of our knowledge and belief.

DATED THIS _____ DAY OF _____ 20 _____

SIGNATURES OF THE PRESIDENT AND ONE PRINCIPAL OFFICER ARE REQUIRED ON THIS FORM

	SIGNATURE	
	PRINT NAME	
	OFFICE HELD	
	ADDRESS	
	POSTAL CODE	
BUS: _____	TELEPHONE	BUS: _____
RES: _____		RES: _____
Email: _____		Email: _____

NAME (PRINT) _____ # _____ Email: _____

PLEASE ENTER THE NAME, DAYTIME TELEPHONE NUMBER AND EMAIL OF THE PERSON COMPLETING THIS REPORT.

Contact us at: LGCA Manitoba
1055 Milt Stegall Drive
Winnipeg, Manitoba R3G 0Z6

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