



**GAMES OF CHANCE FINANCIAL REPORT**

**Rhode Island State Police  
Charitable Gaming Unit  
311 Danielson Pike  
North Scituate, RI 02857**

File # \_\_\_\_\_

This financial report must be filed no later than sixty (60) days after your event (faxed copies are not accepted). Failure to comply will preclude future authorizations and is a violation of RIGL §11-19-37.2, 1956 as amended. *Mail completed financial report to: Rhode Island State Police, Charitable Gaming Unit, 311 Danielson Pike, North Scituate, RI 02857.*

- Name of Organization: \_\_\_\_\_
- Address of Organization: \_\_\_\_\_
- Address Where Function was Held: \_\_\_\_\_
- Date(s) of Event: \_\_\_\_\_
- Type of Event: \_\_\_\_\_
- Were all workers members of the sponsoring organization? \_\_\_\_\_
- Did all workers render their services without compensation? \_\_\_\_\_
- List use(s) for which money raised will be applied (**\*Must be for Charitable Purposes**)

"Charitable Purpose means any benevolent, educational, humane, patriotic, social service, civic, fraternal, police, labor, religious or eleemosynary purpose, provided that no part of the net earnings inures to the benefit of any private shareholder or individual." Proceeds cannot be used for salaries, legal fees, taxes, utility bills, insurance, etc.

- List the names of winner(s)/recipient(s) of prizes: (Use back of form if necessary)

**FINANCIAL INFORMATION**

Total Amount Raised from Raffle	\$ _____
Minus total Expenses paid from raffle proceeds	\$ _____
Net Amount Raised from Raffle that went to cause ( <u>uses</u> listed above)	\$ _____

List **expenses** (prizes, rental of equipment, printing, copies of canceled checks showing which charity/charities proceeds were sent). Attach additional page if necessary. \_\_\_\_\_

I, \_\_\_\_\_, authorized to do business for the above-named organization, do hereby affirm that the above information is a true account of the Game of Chance authorized by the Rhode Island State Police in compliance with §11-19-30.1 of the Rhode Island General Laws, 1956 as amended.

Signature \_\_\_\_\_

Title \_\_\_\_\_ Tel # \_\_\_\_\_