



RHODE ISLAND STATE POLICE

Charitable Gaming Unit

311 Danielson Pike, North Scituate, RI 02857-1907
Telephone: (401) 764-5568 · Fax: (401) 444-1097 · Website: risp.ri.gov/cgu



FINANCIAL REPORT FOR WEEKLY BINGO (Form SP-2)

Report must be submitted after each scheduled event

DIRECTIONS: Type or print clearly. Original must be mailed to the RI State Police Charitable Gaming Unit, 311 Danielson Pike, North Scituate, RI 02857. A copy must be maintained by the organization and, if required, a copy must be sent to the local city/town licensing authority.

1) **Name of Organization:** _____ **File #:** _____

2) **Day of Week:** _____ **Date of the Occasion:** _____

3) **Time of the Occasion:** _____ **Number of Players:** _____

4) **List Names of Workers:** _____

	<u>GROSS RECEIPTS</u>	<u>PRIZE VALUE / PAYOUTS</u>
5) Admissions/Control Card Sales		
# _____ to _____	\$ _____	
Package Sales _____	\$ _____	
_____	\$ _____	

6) **Hard Card Sales and Prizes** \$ _____ \$ _____

7) **Specials (describe)**

Description	Gross Receipts	Prize Value / Payouts
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$

8) **Winner-Take-All (describe)**

Description	Gross Receipts	Prize Value / Payouts
	\$	\$
		\$
		\$
		\$
		\$
		\$

9) **Other Gross Receipts & Prizes** \$ _____ \$ _____
(bingo supplies, concession, pull tabs, etc.)

10) **Door Prizes Awarded** **How many?** _____ \$ _____
**Max of 5. Total payout not to exceed \$100 – (Prizes of free admission to bingo is not allowed)*

11) Total Gross Receipts \$ _____

12) Total Prize Payouts \$ _____
(including prizes paid by check listed below)

13) Prizes Paid by Check (check no., payee, amount) Note: Prizes in excess of \$250 must be paid in check.

Check Number	Payee	Amount
		\$
		\$
		\$
		\$
		\$
		\$

14) Total Prizes Paid by Check \$ _____

15) Gross Bingo Profit \$ _____
Total Gross Receipts (Item 11) less Total Prize Payouts (Item 12)

16) Expenses other than prize payouts (check no., payee, description, amount)

Check Number	Payee	Description	Amount
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

17) Total Expenses (Item 16) for Bingo Occasion \$ _____

18) Net Bingo Profit \$ _____
Total Gross Receipts (Item 15) less Total Expenses (Item 17)

19) Average Dollar Amount Spent per Bingo Player \$ _____

20) Amount in Cash Drawer: Short or Over If short or over, by how much? \$ _____

21) For weekly bingo only: Total building prize pool carried over from previous session (if applicable) \$ _____
NOTE: Rhode Island General Law §11-19-32(14) allows for the offering of a bonus building prize pool that would start at five hundred dollars (\$500) and increase in one hundred dollar (\$100) increments each week until it reaches a maximum amount of one thousand dollars (\$1,000).

I, _____, declare under penalty of perjury that I was the Member-in-Charge of the Bingo Occasion by the licensee herein on _____ day of _____, 20____, and that I personally supervised said occasion, that I have reviewed the foregoing statement and that this statement is true and correct to the best of my knowledge and belief.

Signature of Member-in-Charge

Date