

VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES OFFICE OF CHARITABLE AND REGULATORY PROGRAMS

P.O. Box 526, Richmond, VA 23218 (804) 786-1343, Option 2 www.vdacs.virginia.gov

CHARITABLE GAMING PERMIT APPLICATION (NEW APPLICANT ONLY)

General Instructions

- A. Use this application when applying for an initial charitable gaming permit, or if an organization has not held a charitable gaming permit the last two years.
- B. Complete the entire application and all required attachments, including documents and/or explanation sheets.
- C. Place "N/A" if item is not applicable. Please type or print all answers. Do not use pencil.
- D. Ensure this application includes the area code in each instance where a telephone number is requested and it is signed/dated by the appropriate individual(s).
- E. Enclose a non-refundable \$200 permit application fee and if applicable, an additional non-refundable \$200 for any social organization seeking authorization to operate and conduct electronic pull-tab/electronic gaming payable to: **Treasurer of Virginia**. Volunteer Fire Departments and Rescue Squads who have been recognized by their locality in accordance with § 15.2-955 of the *Code of Virginia*, and who can provide a copy of the ordinance or resolution of the locality, are exempt from the application fee. An organization that selects "type 18" under question 10 of this application is also exempt from the permit application fee.
- F. Mail the completed application, applicable fee, and all required attachments to the following address: VDACS, Office of Charitable and Regulatory Programs, P.O. Box 526, Richmond, Virginia 23218.
- G. Allow 45 days for processing a COMPLETED application. Incomplete application and not providing required attachments will delay the processing and it may be returned to the organization for completion.

	ORGANIZATION INFORMATION					
1.	Organization's Federal Tax Payer	r Identification Numbe	er:	OCRP# (Office Use Only	<i>(</i>)	
2.	Organization's Name:					
	Mailing Address:					
	City:	State:	Zip Code:	Telephone	e:	
	Email Address:			Web Page:		
3.	Organization's Physical Location:					
	City:	State:	Zip Code:	Telephone	e:	
	Political Subdivision (City, County	or Town):				
	Contact Person's Name:			Office/ Position Titl	e:	
	-	First Name	Middle Name Last N	Name		
	Contact Person's Telephone:			Fax Number	er:	
	Email Address:					
4.	Jurisdiction where the organization meets?	on regularly Coun	ty of:	City	of:	
5.	Has the organization been in existence and met on a regular basis in the jurisdiction identified in question 4 for at least three years? If "no" is selected under this question, please provide an explanation as to where the organization has been domiciled for the last three years. If "no," please provide explanation. Yes / No					
6.	Total Number of Members:		Total Nui	mber of Virginia Residen	ts:	
	Provide a complete list of officers are involved in the management activities, including name, address	and operation of char	itable gaming	Membership list attached with information?	all Yes / No	
7.	Provide a copy of the organizatio Charter, Constitution, and any other			-Laws, Copies attached?	Yes / No	

	ORGAN	IZATION INFORM	ATION	
8.	Provide the month, day and year the organization	was formed.	Manth/D	2011/102
	T (T T) (0) (1) (1)	Month/D	Jay/ Year	
9.	Type of Tax Exempt Status Obtained from IRS: (Mark an "X" by the appropriate box)			
	501 (c) TYPE	3	4	8
		10	19	Another 501 (c) type - please identify
10.	Type of Organization:	Type 1	Type 7	Type 13
	(Mark an "X" by the appropriate box)	Type 2	Type 8	
	Please see page 15 of the application for additional	Type 3		
	information on the types of organization in order to make the appropriate selection.	Type 4	Type 10	
		Type 5	Type 11	Type 17
		Type 6	Type 12	Type 18
	Other: (Explain)			
11.	Date Internal Revenue Service Tax Exempt Statu	s obtained.	Month/D	lav/Year
10	ALL ODGANIZATIONS Dravida a comunitática la	stamal Davanus Camilas	Worldwe	yayı i dai
12.	ALL ORGANIZATIONS - Provide a copy of the Ir Tax Exempt Determination Letter (i.e. relating to t tax exempt status).		Copies attached?	Yes / No
12	If "no" is selected under question 12, then please	provide a copy of the		
13.	Internal Revenue Service application for a tax exe		Copies	
	attachments.		attached?	Yes / No
14.	In the last three years, has the organization had a Internal Revenue Service revoked or suspended?		If "yes," please explain on a separate page.	Yes / No
15.	Is the organization in compliance with Federal law the last three tax years of mandated Federal Retu 990EZ, 990N, 990PF, 990T, etc.)?	If "no," please explain on a separate page.	Yes / No	
16.	Attach a copy of the organization's most recent file 990EZ, 990N, 990PF, 990T, etc.)	ed Federal Returns (i.e. IF	RS Form 990, Copies attached?	Yes / No
	If "no" is selected under question 16, then p Statements prepared for the organization, ir sheet, income and expenditure statement, e	ncluding, but not limited to		Yes / No
	If "no" is selected under question 16, then p the organization has not filed any of the Fec 990EZ, 990N, 990PF, 990T, etc.)			Yes / No
17.	If your organization is a part of or related to a nati- please provide a letter of good standing from the national and/or state office has provided this infor current year, please select N/A (not applicable).	national or state organizat	ion. If the	Yes / No / N/A
18.	Is your organization recognized as a corporation of company, as defined by the <i>Code of Virginia</i> , and business in Virginia?	· · · · · · · · · · · · · · · · · · ·	If "no," explain on a separate page on how the organization is exempt from this requirement.	Yes / No
	If "yes" is selected under question 18, then in name as registered with the Virginia State Countries the same as provided under question 2.			Yes / No
	If "no" is selected under the above the organization's alternative name			
19.	If "yes" is selected under question 18, then is your standing" with the Virginia State Corporation Com		If "no," please explain on a separate page.	Yes / No

ORGANIZATION INFORMATION						
20. Is the organization registered with the Department to solicit contributions in the Commonwealth of Virginia pursuant to t Solicitation of Contributions law?		If "no," please explain on a separate page how the organization is exempt from registration.	Yes / No			
If "yes" is selected under question 20, then is the organame as registered with the Department the same as question 2.			Yes / No			
If "no" is selected under the above question, the organization's alternative name under th						
21. Has any officer, director, or bingo/game manager who parti management or operation of any charitable gaming activity convicted of a felony, (ii) convicted of any misdemeanor invested or financial crimes within the preceding five years of the or (iii) participated in the management, operation or conduct charitable game which was found by the Department or a competent jurisdiction to have been operated in violation of ordinance, or Department's regulation within the last five years.	vever been (i) volving fraud, his application, ct of any court of f state law, local	If "yes," please provide name, address, and details on a separate page.	Yes / No			
22. Has any officer, director, or bingo/game manager who partiadministration or conduct of any charitable gaming activity convicted of a felony in the preceding ten years, (ii) convict misdemeanor involving fraud, theft or financial crimes within five years of this application, or (iii) participated in the mana operation or conduct of any charitable game which was four Department or a court of competent jurisdiction to have bee violation of state law, local ordinance, or Department's regulast five years?	If "yes," please provide name, address, and details on a separate page.	Yes / No				
23. Is any officer, director, bingo/game manager, or any member involved in the conduct, operation, or management of charical activities related to a licensed manufacturer/supplier, manufacturer's/supplier's agent, employee, member of the manufacturer's/supplier's immediate family or person residing household who offers, provides, or sells gaming products to organization?	itable gaming ing in the same	If "yes," please provide name, address, and details on a separate page.	Yes / No			
CHARITABLE G	SAMING ACT	TIVITIES				
24. List the location(s), day(s), date(s) and time(s) the charitabl space is needed or your organization utilizes additional facilities, provide the Building Name (If applicable):						
Physical Address:						
City: State Political Subdivision (City, County or Town):	e:	Zip Code:				
Bingo Type of Charitable Gaming		Paper Instant Bingo, Seal C Tabs (Social Quar	ter)			
Activity: (Mark an "X" by the appropriate box) Standalone Raffle		Electronic Pull-Tab/Electro Device (Social Qua	rter)			
Annual Paper Pull-Tab Event		Electronic Pull-Tab/Electro Device (Public Spa	_			
Doyle) of the Week and/or Francisco of Coming A		Texas Hold'em Poker To	urnament			
Day(s) of the Week and/or Frequency of Gaming Activities:		2 01				
Doors Open: am/pm ("Doors open" cannot be more than two hours before "begin game time." This requirement only applies to bingo)		Doors Close: " cannot be more than two hours at requirement only applies to	ter "end game time." This			
Begin Game Time: am/pm	End	Game Time:	am/pm			
	n Time of First Texas m Poker Tournament:		f Second Texas xer Tournament:			
25. Has the organization adopted any "house rules" for the chaidentified in question 24, it wishes to conduct? If "yes," pleathouse rules.			Yes / No			

		CHARITA	BLE GAMING ACT	TIVITIES	
26.		e organization wishing to conduct a bingo section 27 of this application.	ssion? If "no," then please	go to	Yes / No
	FOR	BINGO ONLY			
	a.	If "yes" is selected under question 26, then lease the facility; or (ii) own and has title to bingo session is be conducted?		(Select One):	□ Leased Facility□ Owned Facility
		If either "leased facility" or "owned question, then is the facility located which of the organization's principal Corporation Commission; or (ii) an organization's principal office?	d within the (i) county, city or all office, as registered with	or town in the State	Yes / No
		If either "leased facility" or "owned question, then is the organization auxiliary units thereof organized in association or corporation operating accredited public institution of high school licensed or certified by the of Higher Education for Virginia question Revenue Code?	(i) an association of war ve the United States; (ii) a fra g under the lodge system; per education or other posts Board of Education or the S	terans or ternal and (iii) an secondary State Council	
					Yes / No
		If either "leased facility" or "owned question, then does the establish pursuant to Chapter 2 (§ 4.1-200 e	ment have an ABC license	granted to it	
		Virginia?			Yes / No
		If "yes" is selected under this porganization wishing to conduct has been granted an ABC lice seq.) of Title 4.1 of the Code of held by the organization?	et bingo (i) at an establish nse pursuant to Chapter 2 of <i>Virginia</i> and (ii) such ABC	ment that (§ 4.1-200 et C license is	Yes / No
		If "yes" is selected under this page a copy of the ABC license graum Chapter 2 (§ 4.1-200 et seq.) of	nted to the organization pur	suant to	Yes / No
		If either "leased facility" or "owned question, then is the facility used be purpose of conducting charitable ounder this question, then please putilizing this facility on a separate procession.	y more than one organizat paming activities? <u>If "yes,"</u> rovide the name of each or	ion for the is selected	Yes / No
		If "leased facility" is selected unde		on attach a	res / No
		copy of the current lease for the fa conducted by the organization.			Yes / No
		If "leased facility" is selected unde landlord.	r this particular question, th	en please provide the foll	owing information on the
		Landlord's Corporate Name:			
		Landlord's Name:	F'and Nie and	NA' I II - NI - · · ·	LeadNesse
		Physical Address:	First Name	Middle Name	Last Name
		City:	State:	Zip Code:	
		Telephone:		Fax Number	
		If "leased facility" is selected unde facility.	r this particular question, th		
		Facility's Name:			
		Facility Manager's Name:	—		
		Telephone:	First Name	Middle Name Fax Numbe	Last Name er:
	b.	If "yes" is selected under question 26, then conduct the bingo session contracted or ow		(Select One or Both):	□ Contracted Equipment □ Owned Equipment
		Other (Explain):			
		If "contracted equipment" is select attach a copy of the current agree		estion, then Agreement attached?	Yes / No

		CHARITABLE GAMING ACTIVITIES			
	C.	If "yes" is selected under question 26, then list the name of all manufacturers and/ogaming supplies to your organization, or who the organization anticipates obtaining	them from	o have sold c	haritable
		Supplier's Name:			
		Supplier's Name:			
		Supplier's Name:			
27.		e organization wishing to conduct a raffle event outside of a bingo session? If "no," please go to question 28 of this application.		Yes / No	
	FC	OR STANDALONE RAFFLE ONLY, INCLUDING 50/50, QUEEN OF HEARTS, KING	G OF CLUBS 8	L DUCK RAC	ES
	a.	If "yes" is selected under question 27, then will the raffle event be held in conjunction with a casino or Las Vegas night?		Yes / No	
	b.	If "yes" is selected under question 27, then what date does the organization plan to)		
		begin raffle ticket sales? (Tickets cannot be sold until receipt of a valid amended charitable gaming permit.)		lonth/Day/Year	
		(Tronoto darmot be dota until redelpt of a valid amenada orialitable garning porint.)	IV	ioriii/Day/Tear	
		Date and time of the raffle drawing:			
		3	Month/Da	ay/Year	Time
	C.	If "yes" is selected under question 27, then what is the raffle prize to be given away	/? (Use separat	e page, if nece	ssary.)
	d.	If "yes" is selected under question 27, then was the tangible prize(s) purchased an market value of each prize? (Use additional page, if necessary.)	d/or donated ar	nd what is the	fair
		Describe Tangible Prize: Describe Tangible Prize	:		
		(Select One) \square Prize Donated \square Prize Purchased (Select One) \square Prize D	onated □ Pr	ize Purchase	d
		Market Value of Prize: Market Value of Prize	:		
	e.	If "yes" is selected under question 27, then what is the total purchase price per			
		ticket? (i.e. 1 ticket for \$5 and 4 tickets for \$15)			
	f.	If "yes" is selected under question 27, then will volunteers/members who sell the raffle tickets be allowed to buy raffle tickets?		Yes / No	
		If "yes," is selected under this particular question, then please provide			
		specific information on a separate page on how the organization intends	Page		
		to maintain integrity of the raffle with this allowance.	attached?	Yes / No	
	g.	If "yes" is selected under question 27, then please provide specific information on a separate page on the raffle activity, including who will be responsible for its	a		
		oversight, and all rules of play (i.e. what happens if not enough tickets are sold or how many days a winner has to claim the prize.)	Page attached?	Yes / No	
	h.	If "yes" is selected under question 27, then will all of the raffle tickets be sold within the Commonwealth of Virginia?	ı	Yes / No	
		If "no" is selected under this particular question, then is the organization compliant with all of the regulations of the jurisdictions where the raffle ticket will be sold?		Yes / No	
		If "no" is selected under this particular question, then please provide an		1007110	
		explanation on a separate page on how the organization will sell tickets outside of the Commonwealth of Virginia.	Page attached?	Yes / No	
		Č			

CHARITABLE GAMING ACTIVITIES						
i.	If "yes" is selected under question 27, ther own and has title to the facility or lease the drawing will occur?		(Select One):	□ Leased Facility □ Owned Facility		
Other (Explain):						
	If "leased facility" is selected under this particular question, then please attach a copy of the current lease that authorizes the organization to use the facility in the conduct of the raffle drawing. Lease attached?					
	lowing information on the					
	Landlord's Corporate Name:					
	Landlord's Name:	E'm Norma	Maria de Maria	LeatNess		
	Physical Address:	First Name	Middle Name	Last Name		
	City:	State:	Zip Code:			
	Telephone:		Fax Number	<u></u>		
	·					
	If "leased facility" is selected under facility.	er this particular question, thei	n please provide the fol	lowing information on the		
	Facility's Name:					
	Facility Manager's Name:	First Name	Middle Name	Last Name		
	Telephone:		Fax Number			
j.	If "yes" is selected under question 27, ther organization for the purpose of conducting selected under this question, then please utilizing this facility on a separate page.	charitable gaming activities?	If "yes," is	Yes / No		
k.	If "yes" is selected under question 27, ther conduct the raffle drawing contracted or over the conduction of the conduct		(Select One or Both):	□ Contracted Equipment□ Owned Equipment		
	Other (Explain):		e			
	If "contracted equipment" is selected attach a copy of the current agreement.		tion, then Agreement attached?	Yes / No		
l.	If "yes" is selected under question 27, ther information identified on page 16 of the ap attached to this application?			Yes / No		
card	e social organization wishing to sell electron s and/or pull-tabs in its social quarter? If "no cation.			Yes / No		
		C CAMINO DEVICE AND DAI	DED INICIANT DINICO			
Pl	DR ELECTRONIC PULL-TAB/ELECTRONIC JLL-TABS BY A SOCIAL ORGANIZATION	(SOCIAL QUARTER ONLY)		SEAL CARDS AND/OR		
a.	If "yes" is selected under question 28, ther tabs and paper instant bingo, seal cards a social organization's members and their gu	nd/or pull-tabs are sold open o		Yes / No		
	If "yes" is selected under this part copy of the social organization's rules, which governs a member's	membership requirements and		Yes / No		
b.	If "yes" is selected under question 28, ther where electronic pull-tabs and paper instar sold?			Yes / No		
	If "yes" is selected under this part explanation on a separate page of access to the facility.			Yes / No		

	CHARITA	ABLE GAMING ACTIVIT	TIES		
C.	If "yes" is selected under question 28, then organization (i) exclusively and entirely lead and has title to the facility where the electronistant bingo, seal cards and/or pull-tabs a	sed the facility; or (ii) own onic pull-tabs and paper	(Select	t One):	□ Exclusively & Entirely Leased Facility□ Owned Facility
	If either "exclusively and entirely lesselected under this particular quethe (i) county, city or town in which office, as registered with the State adjoining county, city or town of the	stion, then is the facility located win of the social organization's prince Corporation Commission; or (ii) a	ithin cipal an		Yes / No
	If either "leased facility" or "owned question, then is the organization auxiliary units thereof organized in association or corporation operati accredited public institution of high school licensed or certified by the of Higher Education for Virginia question Revenue Code?	(i) an association of war veterans in the United States; (ii) a fraternal ing under the lodge system; or (iii) ther education or other postsecond Board of Education or the State O	an dary Council		Yes / No
	If either "leased facility" or "owned question, then does the establish pursuant to Chapter 2 (§ 4.1-200 <i>Virginia</i> ?	ment have an ABC license grant	ed to it		Yes / No
	organization wishing to sell el bingo, seal cards and/or pull-t been granted an ABC license	particular question, then is the son ectronic pull-tabs and paper instantabs (i) at an establishment that I pursuant to Chapter 2 (§ 4.1-200 of Virginia and (ii) such ABC licentage.	nt has et		Yes / No
	a copy of the ABC license gra	particular question, then please punted to the social organization puq.) of Title 4.1 of the Code of Virgi	rsuant	Copy attached?	Yes / No
	If either "exclusively and entirely lesselected under this particular questhan one organization for the purpactivities? If "yes," is selected until the name of each organization util	stion, then is the facility used by mose of conducting charitable gam der this question, then please pro-	nore ning <u>vide</u>		Yes / No
	If "exclusively and entirely leased question, then attach a copy of the electronic pull-tabs and paper instare sold by the social organization	e current lease for the facility whe tant bingo, seal cards and/or pull-t	re the	Lease attached?	Yes / No
	If "exclusively and entirely leased following information on the landlo		ticular q	uestion, then p	please provide the
	Landlord's Corporate Name:				
	Landlord's Name:	F. All			
	Physical Address:	First Name Mid	ddle Name	е	Last Name
	City:	State: Zip (Code:		
	Telephone:		-	Fax Number:	
	If "exclusively and entirely leased question, then is there any other of				Yes / No
d.	If "yes" is selected under question 28, then sold electronic pull-tabs and paper instant organization anticipates obtaining them fro	bingo, seal cards and/or pull-tabs			
	Manufacturer's/Supplier's Name:				
	Manufacturer's/Supplier's Name:			<u> </u>	

Manufacturer's/Supplier's Name:

		CHARITABLE GAMING ACTIVITIES			
	e.	If "yes" is selected under question 28, then is the social organization (i) intending to advertise or is advertising electronic pull-tabs/electronic gaming and paper instant bingo, seal cards and/or pull-tabs; and/or (ii) intending to solicit or is soliciting the public to play on an electronic pull-tabs/electronic gaming device or purchase paper instant bingo, seal cards and/or pull-tabs?		Yes / No _	
	f.	If "yes" is selected under question 28 <u>and</u> the social organization intends to operate and conduct electronic pull-tab/electronic gaming device, then how many actual electronic pull-tab/electronic gaming devices will be located within the social organization's social quarter?			
		As a reminder, pursuant to § 18.2-340.26:3 of the <i>Code of Virginia</i> , it states that the maximum number of electronic pull-tab/electronic gaming devices at a location is 18. Furthermore, pursuant to 11VAC20-20-40 (L) of the Charitable Gaming Regulations, a social organization shall only use a device that bears a device tag affixed by the Department.		<u> </u>	
	g.	If "yes" is selected under question 28 and the social organization intends to operate and conduct electronic pull-tab/electronic gaming device, then will the organization contract or own the device from a manufacturer? Other (Explain):	e or Both):	□ Contract Eq □ Owned Equi	•
		If "contract equipment" is selected under this particular question, then attach a copy of the current agreement for the equipment.	Agreement attached?	Yes / No	
	h.	If "yes" is selected under question 28 <u>and</u> the social organization intends to operate and conduct electronic pull-tab/electronic gaming device, then is the social organization's social quarter consist of a contiguous area within its primary location?		Yes / No _	
	i.	If "yes" is selected under question 28 <u>and</u> the social organization intends to operate and conduct electronic pull-tab/electronic gaming device, then is the social organization's primary location where the social quarter is located have a (i) unique physical address as established by the United State Postal Service <u>and</u> (ii) certificate of occupancy issued by the city, county, or town where the building is physically located?		Yes / No	
	j.	If "yes" is selected under question 28 <u>and</u> the social organization intends to operate and conduct electronic pull-tab/electronic gaming device, then has the premises where the social organization intends to operate and conduct electronic pull-tabs/electronic gaming has been deemed a common nuisance pursuant to § 18.2-258 of the <i>Code of Virginia</i> ?		Yes / No	
29.	in the	e organization wishing to operate and conduct electronic pull-tabs/electronic gaming public space of a social organization? If "no," then please go to question 30 of this cation.		Yes / No	
	_	R ELECTRONIC PULL-TAB/ELECTRONIC GAMING DEVICE BY AN ORGANIZATIOCIAL ORGANIZATION	ON IN THE F	PUBLIC SPACE	OF A
	a.	If "yes" is selected under question 29, then is the organization leasing a public space where it intends to operate and conduct electronic pull-tab/electronic gaming device from either a (i) an association of war veterans or auxiliary units thereof organized in the United States; (ii) a fraternal association or corporation operating under the lodge system; or (iii) an accredited public institution of higher education or other postsecondary school licensed or certified by the Board of Education or the State Council of Higher Education for Virginia qualified under § 501(c)(3) of the Internal Revenue Code?	lf "no," explain on a separate page.	Yes / No _	
		If "yes" is selected under this particular question, then attach a copy of the current lease for the facility where the electronic pull-tab/electronic gaming device is to be operated and conducted by the organization.	Lease attached?	Yes / No	

	CHARITA	ABLE GAMING ACT	TIVITIES		
b.	If "yes" is selected under question 29, then organization for the purpose of conducting selected under this question, then please putilizing this facility on a separate page.	charitable gaming activities provide the name of each or	? If "yes," is		Yes / No
	Please provide the following infor	mation on the landlord.			
	Landlord's Corporate Name:				
	Landlord's Name:				
	Physical Address:	First Name	Middle Name		Last Name
	City:	State:	Zip Code:		
	Telephone:		_	Fax Number:	-
	Is there any other organization lea	asing the same facility?	·	ax rumbon	Yes / No
C.	sold electronic pull-tabs to your organization	on, or who the organization	anticipates obta	aining them f	rom.
	Manufacturer's/Supplier's Name:				
	Manufacturer's/Supplier's Name:				
	Manufacturer's/Supplier's Name:				
d.	If "yes" is selected under question 29, then contract or own the electronic pull-tab/electronic a manufacturer?	will the organization	(Select One		□ Contract Equipment □ Owned Equipment
	Other (Explain):				
	If "contract equipment" is selected attach a copy of the current agree		ion, then	Agreement attached?	Yes / No
e.	If "yes" is selected under question 29, then advertise or is advertising electronic pull-taintended to solicit or is soliciting the public	bs/electronic gaming and/o	r (ii)		
	tabs/electronic gaming device?				Yes / No
f.	If "yes" is selected under question 29, then gaming devices will be located within the p operate and conduct?				
	As a reminder, pursuant to § 18.2-340.26:3 the maximum number of electronic pull-tab is 18. Furthermore, pursuant to 11VAC20-Regulations, an organization shall only use by the Department.	Velectronic gaming devices 20-60 (L) of the Charitable	at a location Gaming		
g.	If "yes" is selected under question 29, then organization intends to operate and condugaming device separate from social organi	ct an electronic pull-tab/elec			Yes / No
	Please provide a diagram of the f organization's social quarter and		cial	Diagram attached?	Yes / No
h.	If "yes" is selected under question 29, then organization intends to operate and conduhas been deemed a common nuisance pur	ct electronic pull-tabs/electr	onic gaming		V (N
	Virginia?				Yes / No
	ne organization wishing to conduct an annual use go to question 31 of this application.	paper pull-tab event? If "ne	o," then		Yes / No
F	OR ANNUAL PAPER PULL-TAB EVENT OF	NLY			
a.	If "yes" is selected under question 30, then booster club or a band booster club, which school-sponsored athletic or band activities accredited school (in accordance with § 22 provide scholarships to students attending annual paper pull tab event must submit al 15 of the application. Is the pertinent information of the selection of the selectio	is created solely to raise fusion a public school or prival 1-19 of the Code of Virgini such school wishing to con I pertinent information identical.	nds for ate (a) or to duct an ified on page		
	.,				Yes / No

	CHARITABLE GAMING ACTIVITIES						
	b.	If "yes" is selected under question 30, then does the or own and has title to the facility or lease the facility when paper pull-tab event will occur?		ect One):	□ Leased Facility □ Owned Facility		
		Other (Explain):					
		If "leased facility" is selected under this partic attach a copy of the current lease that author the facility in the conduct of the annual paper	zes the organization to use	Lease attached?	Yes / No		
		If "leased facility" is selected under this partic landlord.	ular question, then please p	rovide the follov	ving information on the		
		Landlord's Name:	t Name Midd	le Name	Last Name		
		Physical Address:	. Name iviidu	ie ivailie	Last Name		
		City: State:	Zip Code:				
		Telephone:		Fax Number:	-		
If "leased facility" is selected under this particular question, then please provide the following information on t facility.							
		Facility's Name:					
		Facility Manager's Name:	Name Midd	In Nines	Last Name		
		Telephone:	t Name Midd	le Name Fax Number:	Last Name		
	C.	If "yes" is selected under question 30, then list the name seal cards and/or pull-tabs to your organization, or who					
		Supplier's Name:					
		Supplier's Name:					
		Supplier's Name:					
	d.	If "yes" is selected under question 30, then is the facilit organization for the purpose of conducting charitable gelected under this question, then please provide the rutilizing this facility on a separate page.	aming activities? If "yes," is	<u>5</u>	Yes / No		
31.		e organization wishing to conduct a Texas Hold'em poke se go to question 32 of this application.	er tournament? If "no," then		Yes / No		
	FOR	TEXAS HOLD'EM POKER TOURNAMENTS ONLY					
	a.	If "yes" is selected under question 31, then does the or or intend to use an operator to administer its poker tou	rnament? informatio	ase complete the in below for the perator.	Yes / No		
		Operator's Name:					
		If "yes" is selected under this particular quest operator's current photo identification, such a					
		government-issued identification.		Copy attached?	Yes / No		
		If "yes" is selected under this particular quest operator's internal control policies that comply 11VAC20-30-60 O.		Copy attached?	Yes / No		
		If "yes" is selected under this particular quest written contract with its operator that complies		Copy attached?	Yes / No		
		If "yes" is selected under this particular quest organization, member of the qualified organization, or associated with the qualified organization, or person residing in the household of a membe organization or of a person affiliated or assocorganization directly or indirectly have any intreceive compensation from, an operator with organization contracts to administer its poker	ation, person affiliated or immediate family member or or of the qualified iated with the qualified erest or ownership in, or which the qualified	ır	Yes / No		

	If "no" is selected under this particular designation and identity of the organization and copy of the organization and a copy of game manager, such as a driver's identification. Individual's Name:	anization's game man conduct of the poker t of a current photo ider license or other gove	nager who shall be ournament for the ntification of the	Information below complete and copy attached?	Yes / No
	First Nam Individual's Designation:	e Middle Name	Last Name		
b.	If "yes" is selected under question 31, then clease the facility; or (ii) own and has title to the bingo session is be conducted?	_		et One):	□ Leased Facility □ Owned Facility
	If either "leased facility" or "owned to question, then is the facility located which of the organization's principa Corporation Commission; or (ii) an organization's principal office?	I within the (i) county, al office, as registered	city or town in with the State		Yes / No
	If either "leased facility" or "owned or question, then is the organization (in auxiliary units thereof organized in association or corporation operation accredited public institution of higher school licensed or certified by the E of Higher Education for Virginia quarkeyenue Code?	i) an association of w the United States; (ii) g under the lodge sys er education or other Board of Education or	rar veterans or) a fraternal stem; and (iii) an postsecondary r the State Council		Yes / No
	If either "leased facility" or "owned to question, then is the facility used by purpose of conducting charitable gounder this question, then please prutilizing this facility on a separate p	y more than one orga aming activities? <u>If "</u> ovide the name of ea	anization for the yes," is selected		Yes / No
	If "leased facility" is selected under copy of the current lease for the fac conducted by the organization.			Lease attached?	Yes / No
	If "leased facility" is selected under qualified organization, member of t affiliated or associated with the quamember or person residing in the horganization or of a person affiliate organization directly or indirectly re the facility where the poker tournan employees, immediate family mem household of the landlord (unless swritten contract to lease a facility for required by 11VAC20-20-120 A an electronic fund transfer from the lar organization's charitable gaming ac	he qualified organiza alified organization, or nousehold of a member of a member of a member of a member of any payment from the second of a member of any payment is directly to the organization of the such payment is mendlord directly to the organization.	tion, person r immediate family er of the qualified the qualified rom the landlord of he agents, ding in the ettly related to a r tournament as ade by check or		Yes / No
	If "leased facility" is selected under landlord.	this particular questi	on, then please pro	ovide the follow	
	Landlord's Corporate Name:				
	Landlord's Name:				
	— Dhysical Address	First Name	Middle Nam	е	Last Name
	Physical Address: City:	State:	Zip Code:		
	Telephone:			Fax Number:	
C.	If "yes" is selected under question 31, attach criteria established in 11VAC20-30-60 Q	ı a sample of the bad	Ige that meets the	Copy attached?	Yes / No
d.	If "yes" is selected under question 31, then that all persons, including the operator's empolunteers, or agents, involved in the manage administration of a poker tournament are trained the policies and procedures relevant to the presponsibilities, on the poker game, and on 30, and 11VAC20-20. Please provide a copy in advance by the department.	ployees, independent gement, operation, co lined in the use of an person's function, on the Charitable Gamir	t contractors, onduct, or y equipment, on the person's ng Law, 11VAC20-	Copy attached?	Yes / No

32.	Name of individual responsible for	or filing financial reports:			
			First Name	Middle Name	Last Name
	Relationship to Organization:				
	Physical Address:				
	City:	State:	Zip Code:	Telephone:	
	E-Mail Address:			Fax Number:	
33.	Where are the financial records s	stored and the contact pers	on responsible for these re	cords?	
	Physical Address:	•	·		
	City:	State:	Zip Code:	Telephone:	
	Contact Person's Name:	otate.			
	Contact Ferson's Name.	First Name Mid	dle Name Last Name		
3/	Does the organization pay or anti	cinate naving any hingo ca	ller or hingo If "ves " ple	ease complete the	
57.	manager for participating in the o		ming activities? information	n below for each	
			individual. Us	se additional page, if ecessary.	s / No
	a. Individual's Name:			·	
	a. marrada ramo.	First Name Midd	le Name Last Name		Select One or Both):
	Registration Number (B	MR/BCR#):		□ birigo Caller	□ Bingo Manager
	b. Individual's Name:	· <u></u>			
		First Name Midd	le Name Last Name		Select One or Both): □ Bingo Manager
	Registration Number (B	MR/BCR#):			bingo ivianagei
<u> </u>					
		CHARITABI F G	AMING ACTIVITIES	3	
25	Describe in detail how the funds of				d in accordance
33.	with those lawful religious, charita			rities will be disburse	u iii accordance
36	Did the organization enter into an	v contract or agreement w	whether verbal or written with		
50.	a third-party to organize, coordinate				
	organization's charitable gaming				
	340.33 (2) of the <i>Code of Virginia</i> a contract with or otherwise empl			to	
	organizing, managing, or conduc				
	section, all compensation whether			Yes	s / No
	OD VOLUNTEED FIDE	DEDARTMENTO	ND DECOME COM	ADC EVENDE	FROM THE
ľ	FOR VOLUNTEER FIRE				
	APPLICATION	FEE UNDER § 15.	2-955 OF THE <i>CO</i>	DE OF VIRGIN	IA
37.	Is the organization currently reco			:_	
	Virginia by an ordinance or resol located as being part of the safet		_		- / NI-
	located as being part of the salet	y program of the political si	DUIVISIOIT:	Yes	s / No
38.	Date the organization was recogn			_	
	Virginia by an ordinance or resol			is	
	located as being part of the safet	y program of the political si	JDGIVISION.	Month	/Day/Year
				IVIOTILI	Day/Teal
39.	Name of political subdivision that	has recognized the application	ant organization as being		
	part of its safety program.				
				City, Cou	inty or Town
40.	Provide a copy of the dated ordin				
	political subdivision that designat program of the political subdivision		on as being part of the safe	Copico	- / NI -
	program of the political subulvision	// I.		attached? Yes	s / No

IMPORTANT NOTICE TO ALL ORGANIZATIONS

All organizations conducting charitable gaming must file a quarterly financial report beginning with the month they (1) conduct bingo, (2) conduct instant bingo, seal cards and pull-tabs, (3) conduct electronic gaming/electronic pull-tabs and (4) begin raffle sales, and each quarter thereafter as long as they have charitable gaming receipts or disbursements, and must file the annual financial report, as prescribed by law.

Failure to do so will result in the automatic revocation of the organization's charitable gaming permit in accordance with § 18.2-340.30 (E) of the Code of Virginia.

Organizations are required to file reports by the following dates:

Quarterly Report Period

January 1 - March 31 April 1 - June 30 July 1 - September 30 October 1 - December 31

Annual Report Period

January 1 through December 31

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Quarterly Report Due Date

June 1 September 1 December 1 March 1

Annual Report Due Date

March 15

\$25.00 per day late filing penalty.

To obtain the Financial Reporting Forms, please visit the OCRP web site at www.vdacs.virginia.gov/charitable-gaming-financial-reporting.shtml

GAMING PERSONNEL INFORMATION

Section 18.2-340.25 of *Code of Virginia* provides that no charitable gaming permit can be issued prior to a reasonable background investigation conducted by the Office of Charitable and Regulatory Programs.

This form must be completed for the following individual in each office/position:

- (1) President, Chief Executive Officer or equivalent position;
- (3) for each Bingo Manager or Game Manager.
- (2) Treasurer, Chief Financial Officer or equivalent position; and

(2) Treasurer, Officer triangular officer of equivalent position, and							
(Please o	OFFICE/PO	SITION psition box for the individ	lual)				
Officer, Govern equivalent position	President, Commander, Chief Executive Officer, Governor, Exalted Ruler or equivalent position Bingo Manager or		Treasurer, Chief Financial Officer, Financial Officer or equivalent position				
Game Manager		Charitable Host Representative					
	PERSONAL INF						
incomplete responses will delay prod Name).		ou do not have a middle name, t	hen insert "NMN" (No Middle				
Full Name: Complete First Name	Complete Middle Name	Complete Last Name	on Title:				
Term of Office Holder:	Begin Term Date:	·	End Term Date:				
Social Security Number:	Date of Birth:	Race:	Sex:				
Physical Home Street Address:							
City:		State:	Zip Code:				
Daytime Phone Number: _		Fax Number:					
Other Phone Number: _							
E-Mail Address:							
DISCLAIMER AND AFFIDAVIT							
I understand that I am required to su	bmit a <u>Gaming Personnel Info</u>	rmation Update Form for any ch	anges within this application.				
Signature:			Date:				

Prior to issuance of a license or permit, the Office of Charitable and Regulatory Programs reserves the right to request additional information from those named on this particular "Gaming Personnel Information" form.

THE PRESIDENT/CHIEF EXECUTIVE OFFICER, OR DESIGNEE, OF THE ORGANIZATION MUST PRINT HIS/HER NAME, AFFIX HIS/HER SIGNATURE, AND PROVIDE THE DATE.

I hereby certify that all information provided in this application and attachments are true to the best of my knowledge, information and belief, that I have not knowingly made a false statement of material fact on this application, and that I have read and understand the terms and conditions as set out under the charitable gaming statutes and Charitable Gaming Regulations. I understand that untruthful or misleading answers are cause for denial of the charitable gaming permit. I also agree that the organization listed on this application and its officers, directors, members, and individuals affiliated with the organization will abide by the charitable gaming statutes and Charitable Gaming Regulations during the management, operation and conduct of charitable gaming activities. I understand that the charitable organization is responsible for the conduct of any operator administering its Texas Hold'em Poker Tournament. I understand that if any information on the application changes or is found to be inaccurate, then the organization shall notify the department and provide the updated or corrected information within three

Signature:			Date:		
Name:				Office/ Position Title:	
	Complete First Name	Complete Middle Name	Complete Last Name		

Form 201-N

SUPPLEMENTAL INFORMATION

In order to answer question 10 of the application, please review the types of organizations, as defined by § 18.2-340.16 of the *Code of Virginia*, which defines an "organization" as one of the following:

- Type 1. A volunteer fire department or volunteer emergency medical services agency or auxiliary unit thereof that has been recognized in accordance with § 15.2-955 by an ordinance or resolution of the political subdivision where the volunteer fire department or volunteer emergency medical services agency is located as being a part of the safety program of such political subdivision;
- Type 2. An organization that is exempt from income tax pursuant to § 501(c)(3) of the Internal Revenue Code, is operated, and has always been operated, exclusively for educational purposes, and awards scholarships to accredited public institutions of higher education or other postsecondary schools licensed or certified by the Board of Education or the State Council of Higher Education for Virginia;
- Type 3. An athletic association or booster club or a band booster club established solely to raise funds for school-sponsored athletic or band activities for a public school or private school accredited pursuant to § 22.1-19 or to provide scholarships to students attending such school;
- Type 4. An association of war veterans or auxiliary units thereof organized in the United States;
- Type 5. A fraternal association or corporation operating under the lodge system;
- Type 6. An organization that is exempt from income tax pursuant to § 501(c)(3) of the Internal Revenue Code and is operated, and has always been operated, exclusively to provide services and other resources to older Virginians, as defined in § 51.5-116;
- Type 7. An organization that is exempt from income tax pursuant to § 501(c)(3) of the Internal Revenue Code and is operated, and has always been operated, exclusively to foster youth amateur sports;
- Type 8. An organization that is exempt from income tax pursuant to § 501(c)(3) of the Internal Revenue Code and is operated, and has always been operated, exclusively to provide health care services or conduct medical research;
- Type 9. An accredited public institution of higher education or other postsecondary school licensed or certified by the Board of Education or the State Council of Higher Education for Virginia that is exempt from income tax pursuant to § 501(c)(3) of the Internal Revenue Code;
- Type 10. A church or religious organization that is exempt from income tax pursuant to § 501(c)(3) of the Internal Revenue Code;
- Type 11. An organization that is exempt from income tax pursuant to § 501(c)(3) or 501(c)(4) of the Internal Revenue Code and is operated, and has always been operated, exclusively to (i) create and foster a spirit of understanding among the people of the world; (ii) promote the principles of good government and citizenship; (iii) take an active interest in the civic, cultural, social, and moral welfare of the community; (iv) provide a forum for the open discussion of matters of public interest; (v) encourage individuals to serve the community without personal financial reward; and (vi) encourage efficiency and promote high ethical standards in commerce, industries, professions, public works, and private endeavors;
- Type 12. An organization that is exempt from income tax pursuant to § 501(c)(3) of the Internal Revenue Code and is operated, and has always been operated, exclusively to (i) raise awareness of law-enforcement officers who died in the line of duty; (ii) raise funds for the National Law Enforcement Officers Memorial and Museum; and (iii) raise funds for the charitable causes of other organizations that are exempt from income tax pursuant to § 501(c)(3) of the Internal Revenue Code:
- Type 13. An organization that is exempt from income tax pursuant to § 501(c)(3) of the Internal Revenue Code and is operated, and has always been operated, exclusively to (i) promote the conservation of the environment, caves, or other natural resources; (ii) promote or develop opportunities for the use of science and technology to advance the conservation of the environment, caves, or other natural resources; and (iii) raise funds for the conservation of the environment, caves, or other natural resources or provide grant opportunities to other nonprofit organizations that are devoted to such conservation efforts;
- Type 14. An organization that is exempt from income tax pursuant to § 501(c)(3) of the Internal Revenue Code that manages a museum that is operated, and has always been operated, exclusively for the purposes of musical heritage and the legacy of the "1927 Bristol Sessions";
- Type 15. An organization (i) established on or before December 31, 1963, as a result of its members being prohibited from joining similar existing organizations because of laws such as the Public Assemblages Act of 1926, which required the racial segregation of all public events in the Commonwealth; (ii) that is exempt from income tax pursuant to § 501(c)(7) of the Internal Revenue Code; and (iii) that is operated, and has always been operated, for community awareness and action through educational, economic, and cultural service activities;
- Type 16. An organization established on or before December 31, 1977, that is exempt from income tax pursuant to § 501(c)(7) of the Internal Revenue Code and is incorporated, in part, to raise funds for donation to organizations whose missions include promoting early detection of and public education about and supporting research and treatment options for heart disease and various cancers;
- Type 17. A local chamber of commerce; or
- Type 18. Any other nonprofit organization that is exempt from income tax pursuant to § 501(c) of the Internal Revenue Code and that raises funds by conducting raffles, bingo, instant bingo, pull tabs, or seal cards that generate annual gross receipts of \$40,000 or less, provided that such gross receipts, less expenses and prizes, are used exclusively for charitable, educational, religious, or community purposes. Notwithstanding § 18.2-340.26:1, proceeds from instant bingo, pull tabs, and seal cards shall be included when calculating an organization's annual gross receipts for the purposes of this subdivision.

Charitable Gaming Permit Application (New Applicant Only)
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STANDALONE RAFFLE REQUIREMENTS

Information/questions in this particular section must be completed/answered in its entirety for each standalone raffle, if the organization intends to conduct a standalone raffle outside of a bingo session. Organizations are responsible for ensuring their compliance with all State and Federal laws when conducting its standalone raffle activities.

RAFFLE TICKETS

(Attach a sample copy of each standalone raffle ticket.)

Each raffle ticket must conform to the requirements of 11VAC20-20-140 (C) of the Charitable Gaming Regulations, including, but not limited to, raffle tickets being sequentially numbered and having a detachable section, with one portion going to the seller and the other portion to the purchaser.

The portion that is retained by the <u>Seller</u> must include:	The portion that goes to the <u>Purchaser</u> must include, but is not limited to:		
The purchasers name, complete address and contact telephone number. The matching sequential ticket number to the portion	The ticket number. The selling price of each ticket. The prize(s) to be awarded.		
provided to the purchaser.	The date, time, and name/address of the physical. The physical location of the drawing.		
	The name, address and telephone number of the organization.		
	The charitable gaming permit number (after issuance by the Department).		

NOTE: Raffle tickets may not be printed until the organization is authorized in writing to do so by OCRP.

RAFFLE NARRATIVE

(Please use a separate sheet to answer the following questions.)

Please provide a written narrative describing how the organization will conduct the raffle. Please be very specific and detailed. This narrative must include, but is not limited to, the following:

Part I - Scope and Purpose of Raffle

- a. How many raffle tickets will be printed?
- b. How much will each raffle ticket cost?
- c. What are the anticipated gross receipts (Multiply Line A by Line B)

d. What will happen if the raffle is not successful such as not all of the tickets are sold to pay for the raffle prize?

- e. Attach a copy of the rules of play that will govern each standalone raffle, as required by question 25 on the application. Please explain how raffle ticket purchasers will receive these rules?
- f. For all prizes identified in quesiton 27c of the application, please provide a letter of intent from the individual/business from which the prize is being purchased/donated stating the (i) terms and conditions of the transaction(s), if any and (ii) the fair market value of the prize. This letter from a business needs to be written on the business letterhead, signed and dated from an authorized person. If the organization already owns the prize, which is not a motor vehicle, motorcycle, boat, or trailer, then please provide confirmation of its posession of the prize and/or receipt. If the organization already owns the prize, which is a motor vehicle, motorcycle, boat or trailer, then please provide a copy of the original bill of sale or title.

Part 2 - Sales Distribution

- a. How will the money from the sales of raffle tickets be controlled; accounted for; and collected from purchasers and sellers?
- b. How will the distribution and the selling of raffle tickets be handled?
- c. Pursuant to 11VAC20-20-90 (C) of the Charitable Gaming Regulations, it states, "[w]inning tickets and unsold tickets shall be maintained for three years following the close of the fiscal year." As such, does the organization intend to collect unsold raffle tickets from sellers and where does it intend to store these unsold and winning raffle tickets during this three year time frame?
- d. Please provide any other information pertinent to the sales distribution of the raffle tickets.

Part 3 - Drawing Process and Prize Winners

- a. Who will conduct the raffle drawing?
- b. Describe the drawing process.
- c. If applicable, provide a copy of the current lease that authorizes the organization to use the facility in the conduct of the drawing for its raffle, as required by question 27i of the application.
- d. How will the prizes be distributed? Does the winner need to be present? How many days does the winner have to claim the prize? What happens if the winner does not claim the prize?
- e. Please provide any other information pertinent to the drawing process and/or prize winners of the raffle ticket.

ANNUAL PAPER PULL-TAB EVENT REQUIREMENTS

Information/questions in this particular section must be completed/answered in its entirety for the activity conducted in accordance with § 18.2-340.26:2 of the *Code of Virginia*. Organizations are responsible for ensuring their compliance with all State and Federal laws when conducting its annual paper pull-tab event.

STATUTORY REQUIREMENTS

In accordance § 18.2-340.16 of the *Code of Virginia*, it defines organization, in part as "[a]n athletic association or booster club or a band booster club established solely to raise funds for school-sponsored athletic or band activities for a public school or private school accredited pursuant to § 22.1-19 or to provide scholarships to students attending such school."

In accordance with § 18.2-340.26:2 of the *Code of Virginia*, it provides that "[a]s a part of its annual fund-raising event, any qualified organization that is an athletic association or booster club or a band booster club may sell instant bingo, pull tabs, or seal cards provided that (i) the sale is limited to a single event in a calendar year and (ii) the event is open to the public."

An organization, as reference above must meet the requirements of an athletic association or booster club or a band booster club and all of the requirements under § 18.2-340.26:2 of the *Code of Virginia* prior to submitting an application to obtain a charitable gaming permit in order to conduct its annual paper pull-tab event.

ACTIVITY REQUIREMENTS

- 1. The organization must have a valid charitable gaming permit issued by OCRP.
- 2. Provide a copy of the rules of play that will be utilized in the conduct of the annual paper pull-tab event.
- 3. Provide the name of all individuals and/or suppliers from whom the organization anticipates obtaining the deals of paper instant bingo, pull-tabs or seal cards to your organization for its annual paper pull-tab event.
- 4. If applicable, provide a copy of the current lease that authorizes the organization to use the facility in the conduct of the drawing for its annual paper pull-tabs event, as required by question 30b of the application.
- 5. Provide a narrative describing the annual paper pull-tab event.
- 6. The qualified organization must ensure compliance with following requirements while conducting the annual paper pull-tab
 - a. In accordance with § 18.2-340.26:2 of the *Code of Virginia*, it requires the paper instant bingo, pull-tabs or seal cards to be sold only as part of a single annual fund-raising event that occurs once a calendar year.
 - b. The organization cannot conduct paper instant bingo, pull tab, or seal card activities on any day, at any time, or at any other premise(s) not specified on the organization's charitable gaming permit.
 - c. The organization cannot conduct any other charitable gaming activity at its annual paper pull-tab event, including, but not limited to, bingo, 50/50 raffles, basket bingo, etc., unless it is specified on the organization's charitable gaming permit.
 - d. The event must be open to the public as required by § 18.2-340.26:2 of the Code of Virginia.
 - e. The charitable gaming permit and the flare for each deal of paper instant bingo, pull-tab or seal card must be prominently posted.
 - f. No paper instant bingo, pull tab or seal card may be sold at a price different from the price printed on the ticket by the manufacturer on either the instant bingo, pull tab, seal card or flare.
 - g. The organization must purchase all deals of paper instant bingo, pull tabs or seal cards from a licensed charitable gaming supplier.
 - h. The invoice for each paper instant bingo, pull tab or seal card being offered for sale or sold during the referenced annual paper pull-tab event shall be on the premises at all times listed on the permit.
 - i. Winning paper instant bingo, pull tab or seal card tickets shall only be redeemed at the date/time/location indicated on the organization's charitable gaming permit.
 - j. No paper instant bingo, pull tab or seal card ticket shall be provided or sold to any person under 18 years of age. No individual under 18 years of age shall play or redeem any paper instant bingo, pull tab or seal card ticket.
 - k. All paper instant bingo, pull tab, and seal card supplies utilized at the referenced annual fund-raising event shall be paid for only by check drawn on the organization's charitable gaming account. All monies related to the annual paper pull-tab event must be deposited into the organization's charitable gaming account within two business days after the conclusion of the event.
 - I. All recordkeeping requirements and financial report requirements under the §18.2-340.16 et seq. of the *Code of Virginia* and the Charitable Gaming Regulations must be adhered to.
 - m. All unsold paper instant bingo, pull tab, and seal card games shall be inventoried at the close of the annual paper pull-tab event, and held in accordance with § 18.2-340.16 et seq. of the *Code of Virginia* and the Charitable Gaming Regulations.