



**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 Identification Number: _____	OCR# (Office Use Only) _____			
2. Organization's Name: _____				
Mailing Address: _____				
City: _____	State: _____ Zip Code: _____ Telephone: _____			
Email Address: _____	Web Page: _____			
3. Organization's Physical Location: _____				
City: _____	State: _____ Zip Code: _____ Telephone: _____			
Political Subdivision (<i>City, County or Town</i>): _____				
Contact Person's Name: _____	Office/ Position Title: _____			
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">First Name</td> <td style="width: 33%; border: none;">Middle Name</td> <td style="width: 33%; border: none;">Last Name</td> </tr> </table>	First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name		
Contact Person's Telephone: _____	Fax Number: _____			
Email Address: _____				
4. Jurisdiction where the organization regularly meets? _____				
	County 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 Number of Virginia Residents: _____			
Provide a complete list of officers, directors, or bingo/game manager who are involved in the management and operation of charitable gaming activities, including name, address, and membership date.	Membership list attached with all information? Yes / No _____			
7. Provide a copy of the organization's most recent Articles of Incorporation, By-Laws, Charter, Constitution, and any other organizing documents.	Copies attached? Yes / No _____			

ORGANIZATION INFORMATION

8. Provide the month, day and year the organization was formed.	_____																		
	Month/Day/Year																		
9. Type of Tax Exempt Status Obtained from IRS: (Mark an "X" by the appropriate box)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center; padding: 5px;">3</td> <td style="width: 33%; text-align: center; padding: 5px;">4</td> <td style="width: 33%; text-align: center; padding: 5px;">8</td> </tr> <tr> <td style="text-align: center; padding: 5px;">501 (c) TYPE</td> <td style="text-align: center; padding: 5px;">10</td> <td style="text-align: center; padding: 5px;">19</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center; padding: 5px;">Another 501 (c) type - please identify</td> </tr> </table>	3	4	8	501 (c) TYPE	10	19			Another 501 (c) type - please identify									
3	4	8																	
501 (c) TYPE	10	19																	
		Another 501 (c) type - please identify																	
10. Type of Organization: (Mark an "X" by the appropriate box)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Type 1 _____</td> <td style="width: 33%;">Type 7 _____</td> <td style="width: 33%;">Type 13 _____</td> </tr> <tr> <td>Type 2 _____</td> <td>Type 8 _____</td> <td>Type 14 _____</td> </tr> <tr> <td>Type 3 _____</td> <td>Type 9 _____</td> <td>Type 15 _____</td> </tr> <tr> <td>Type 4 _____</td> <td>Type 10 _____</td> <td>Type 16 _____</td> </tr> <tr> <td>Type 5 _____</td> <td>Type 11 _____</td> <td>Type 17 _____</td> </tr> <tr> <td>Type 6 _____</td> <td>Type 12 _____</td> <td>Type 18 _____</td> </tr> </table>	Type 1 _____	Type 7 _____	Type 13 _____	Type 2 _____	Type 8 _____	Type 14 _____	Type 3 _____	Type 9 _____	Type 15 _____	Type 4 _____	Type 10 _____	Type 16 _____	Type 5 _____	Type 11 _____	Type 17 _____	Type 6 _____	Type 12 _____	Type 18 _____
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Type 3 _____	Type 9 _____	Type 15 _____																	
Type 4 _____	Type 10 _____	Type 16 _____																	
Type 5 _____	Type 11 _____	Type 17 _____																	
Type 6 _____	Type 12 _____	Type 18 _____																	
Please see page 15 of the application for additional information on the types of organization in order to make the appropriate selection.																			
Other: (Explain) _____																			
11. Date Internal Revenue Service Tax Exempt Status obtained.	_____																		
	Month/Day/Year																		
12. ALL ORGANIZATIONS - Provide a copy of the Internal Revenue Service Tax Exempt Determination Letter (i.e. relating to the organization's 501(c) tax exempt status).	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 20%; text-align: center; padding: 5px;">Copies attached?</td> <td style="width: 20%; text-align: center; padding: 5px;">Yes / No _____</td> </tr> </table>		Copies attached?	Yes / No _____															
	Copies attached?	Yes / No _____																	
13. If "no" is selected under question 12, then please provide a copy of the Internal Revenue Service application for a tax exempt status, including all attachments.	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 20%; text-align: center; padding: 5px;">Copies attached?</td> <td style="width: 20%; text-align: center; padding: 5px;">Yes / No _____</td> </tr> </table>		Copies attached?	Yes / No _____															
	Copies attached?	Yes / No _____																	
14. In the last three years, has the organization had a 501(c) status with the Internal Revenue Service revoked or suspended?	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 20%; text-align: center; padding: 5px;">If "yes," please explain on a separate page.</td> <td style="width: 20%; text-align: center; padding: 5px;">Yes / No _____</td> </tr> </table>		If "yes," please explain on a separate page.	Yes / No _____															
	If "yes," please explain on a separate page.	Yes / No _____																	
15. Is the organization in compliance with Federal law relative to the filing, in the last three tax years of mandated Federal Returns (i.e. IRS Form 990, 990EZ, 990N, 990PF, 990T, etc.)?	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 20%; text-align: center; padding: 5px;">If "no," please explain on a separate page.</td> <td style="width: 20%; text-align: center; padding: 5px;">Yes / No _____</td> </tr> </table>		If "no," please explain on a separate page.	Yes / No _____															
	If "no," please explain on a separate page.	Yes / No _____																	
16. Attach a copy of the organization's most recent filed Federal Returns (i.e. IRS Form 990, 990EZ, 990N, 990PF, 990T, etc.)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 20%; text-align: center; padding: 5px;">Copies attached?</td> <td style="width: 20%; text-align: center; padding: 5px;">Yes / No _____</td> </tr> </table>		Copies attached?	Yes / No _____															
	Copies attached?	Yes / No _____																	
If "no" is selected under question 16, then please provide the most recent Financial Statements prepared for the organization, including, but not limited to, balance sheet, income and expenditure statement, etc.	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 20%; text-align: center; padding: 5px;">Copies attached?</td> <td style="width: 20%; text-align: center; padding: 5px;">Yes / No _____</td> </tr> </table>		Copies attached?	Yes / No _____															
	Copies attached?	Yes / No _____																	
If "no" is selected under question 16, then please provide an explanation as to why the organization has not filed any of the Federal Returns (i.e. IRS Form 990, 990EZ, 990N, 990PF, 990T, etc.)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 20%; text-align: center; padding: 5px;">Copies attached?</td> <td style="width: 20%; text-align: center; padding: 5px;">Yes / No _____</td> </tr> </table>		Copies attached?	Yes / No _____															
	Copies attached?	Yes / No _____																	
17. If your organization is a part of or related to a national and/or state organization, then please provide a letter of good standing from the national or state organization. If the national and/or state office has provided this information to the Department for the current year, please select N/A (not applicable).	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 20%; text-align: center; padding: 5px;">Copies attached?</td> <td style="width: 20%; text-align: center; padding: 5px;">Yes / No / N/A _____</td> </tr> </table>		Copies attached?	Yes / No / N/A _____															
	Copies attached?	Yes / No / N/A _____																	
18. Is your organization recognized as a corporation or a form of limited liability company, as defined by the Code of Virginia, and authorized to do business in Virginia?	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 20%; text-align: center; padding: 5px;">If "no," explain on a separate page on how the organization is exempt from this requirement.</td> <td style="width: 20%; text-align: center; padding: 5px;">Yes / No _____</td> </tr> </table>		If "no," explain on a separate page on how the organization is exempt from this requirement.	Yes / No _____															
	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 is the organization's name as registered with the Virginia State Corporation Commission the same as provided under question 2.	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 20%;"></td> <td style="width: 20%; text-align: center; padding: 5px;">Yes / No _____</td> </tr> </table>			Yes / No _____															
		Yes / No _____																	
If "no" is selected under the above question, please provide the organization's alternative name under this registration.																			
19. If "yes" is selected under question 18, then is your organization in "good standing" with the Virginia State Corporation Commission?	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="width: 20%; text-align: center; padding: 5px;">If "no," please explain on a separate page.</td> <td style="width: 20%; text-align: center; padding: 5px;">Yes / No _____</td> </tr> </table>		If "no," please explain on a separate page.	Yes / No _____															
	If "no," please explain on a separate page.	Yes / No _____																	

ORGANIZATION INFORMATION

20. Is the organization registered with the Department to solicit charitable contributions in the Commonwealth of Virginia pursuant to the Virginia 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 organization's name as registered with the Department the same as provided under question 2. Yes / No _____

If "no" is selected under the above question, please provide the organization's alternative name under this registration. _____

21. Has any officer, director, or bingo/game manager who participates in the management or operation of any charitable gaming activity ever been (i) convicted of a felony, (ii) convicted of any misdemeanor involving fraud, theft or financial crimes within the preceding five years of this application, or (iii) participated in the management, operation or conduct of any charitable game which was found by the Department or a court of competent jurisdiction to have been operated in violation of state law, local ordinance, or Department's regulation within the last five years? *If "yes," please provide name, address, and details on a separate page.* Yes / No _____

22. Has any officer, director, or bingo/game manager who participates in the administration or conduct of any charitable gaming activity been (i) convicted of a felony in the preceding ten years, (ii) convicted of any misdemeanor involving fraud, theft or financial crimes within the preceding five years of this application, or (iii) participated in the management, operation or conduct of any charitable game which was found by the Department or a court of competent jurisdiction to have been operated in violation of state law, local ordinance, or Department's regulation within the last 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 who is involved in the conduct, operation, or management of charitable gaming 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 in the same household who offers, provides, or sells gaming products to your organization? *If "yes," please provide name, address, and details on a separate page.* Yes / No _____

CHARITABLE GAMING ACTIVITIES

24. List the location(s), day(s), date(s) and time(s) the charitable gaming activity(s) will be held: (List all planned activities below. If more space is needed or your organization utilizes additional facilities, provide the same information relative to the additional facility on a separate page and attach.)

Building Name (If applicable): _____

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Political Subdivision (City, County or Town): _____

Type of Charitable Gaming Activity: (Mark an "X" by the appropriate box)	Bingo _____ Standalone Raffle _____ Annual Paper Pull-Tab Event _____	Paper Instant Bingo, Seal Cards & Pull-Tabs (Social Quarter) _____ Electronic Pull-Tab/Electronic Gaming Device (Social Quarter) _____ Electronic Pull-Tab/Electronic Gaming Device (Public Space) _____ Texas Hold'em Poker Tournament _____
---	---	--

Day(s) of the Week and/or Frequency of Gaming Activities: _____

Doors Open: _____ am/pm Doors Close: _____ 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 after "end game time." This requirement only applies to bingo)

Begin Game Time: _____ am/pm End Game Time: _____ am/pm

Two Texas Hold'em Poker Tournaments Within the Same 24-Hour Period Only (must be at least two hours apart): _____ Begin Time of First Texas Hold'em Poker Tournament: _____ Begin Time of Second Texas Hold'em Poker Tournament: _____

25. Has the organization adopted any "house rules" for the charitable gaming activity identified in question 24, it wishes to conduct? If "yes," please attach a copy of the house rules. Yes / No _____

CHARITABLE GAMING ACTIVITIES

26. Is the organization wishing to conduct a bingo session? If "no," then please go to question 27 of this application. Yes / No _____

FOR BINGO ONLY

a. If "yes" is selected under question 26, then does the organization (i) lease the facility; or (ii) own and has title to the facility where the bingo session is be conducted? (Select One): Leased Facility
 Owned Facility

If either "leased facility" or "owned facility" is selected under this particular question, then is the facility located within the (i) county, city or town in which of the organization's principal office, as registered with the State Corporation Commission; or (ii) an adjoining county, city or town of the organization's principal office? Yes / No _____

If either "leased facility" or "owned facility" is selected under this particular question, then is the organization (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; and (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? Yes / No _____

If either "leased facility" or "owned facility" is selected under this particular question, then does the **establishment** have an ABC license granted to it pursuant to Chapter 2 (§ 4.1-200 et seq.) of Title 4.1 of the *Code of Virginia*? Yes / No _____

If "yes" is selected under this particular question, then is the organization wishing to conduct bingo (i) at an **establishment** that has been granted an ABC license pursuant to Chapter 2 (§ 4.1-200 et seq.) of Title 4.1 of the *Code of Virginia* and (ii) such ABC license is held by the organization? Yes / No _____

If "yes" is selected under this particular question, then please provide a copy of the ABC license granted to the organization pursuant to Chapter 2 (§ 4.1-200 et seq.) of Title 4.1 of the *Code of Virginia*. Copy attached? Yes / No _____

If either "leased facility" or "owned facility" is selected under this particular question, then is the facility used by more than one organization for the purpose of conducting charitable gaming activities? If "yes," is selected under this question, then please provide the name of each organization utilizing this facility on a separate page. Yes / No _____

If "leased facility" is selected under this particular question, then attach a copy of the current lease for the facility where the bingo session is to be conducted by the organization. Lease attached? Yes / No _____

If "leased facility" is selected under this particular question, then please provide the following information on the landlord.

Landlord's Corporate Name: _____

Landlord's Name: _____
First Name Middle Name Last Name

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax Number: _____

If "leased facility" is selected under this particular question, then please provide the following information on the facility.

Facility's Name: _____

Facility Manager's Name: _____
First Name Middle Name Last Name

Telephone: _____ Fax Number: _____

b. If "yes" is selected under question 26, then is the equipment used to conduct the bingo session contracted or owned by the organization? (Select One or Both): Contracted Equipment
 Owned Equipment

Other (Explain): _____

If "contracted equipment" is selected under this particular question, then attach a copy of the current agreement for the equipment. Agreement attached? Yes / No _____

CHARITABLE GAMING ACTIVITIES

c. If "yes" is selected under question 26, then list the name of all manufacturers and/or suppliers who have sold charitable gaming supplies to your organization, or who the organization anticipates obtaining them from

Supplier's Name: _____

Supplier's Name: _____

Supplier's Name: _____

27. Is the organization wishing to conduct a raffle event outside of a bingo session? If "no," then please go to question 28 of this application.

Yes / No _____

FOR STANDALONE RAFFLE ONLY, INCLUDING 50/50, QUEEN OF HEARTS, KING OF CLUBS & DUCK RACES

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.)

_____/_____/_____
Month/Day/Year

Date and time of the raffle drawing:

_____/_____/_____|_____
Month/Day/Year Time

c. If "yes" is selected under question 27, then what is the raffle prize to be given away? (Use separate page, if necessary.)

d. If "yes" is selected under question 27, then was the tangible prize(s) purchased and/or donated and what is the fair market value of each prize? (Use additional page, if necessary.)

Describe Tangible Prize: _____

Describe Tangible Prize: _____

(Select One) Prize Donated Prize Purchased

(Select One) Prize Donated Prize Purchased

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 to maintain integrity of the raffle with this allowance.

Page
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 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?

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 explanation on a separate page on how the organization will sell tickets outside of the Commonwealth of Virginia.

Page
attached?

Yes / No _____

CHARITABLE GAMING ACTIVITIES

- i. If "yes" is selected under question 27, then does the organization own and has title to the facility or lease the facility where the raffle 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? Yes / No _____

If "leased facility" is selected under this particular question, then please provide the following information on the landlord.

Landlord's Corporate Name: _____

Landlord's Name: _____
First Name Middle Name Last Name

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax Number: _____

If "leased facility" is selected under this particular question, then please provide the following information on the facility.

Facility's Name: _____

Facility Manager's Name: _____
First Name Middle Name Last Name

Telephone: _____ Fax Number: _____

- j. If "yes" is selected under question 27, then is the facility used by more than one organization for the purpose of conducting charitable gaming activities? If "yes," is selected under this question, then please provide the name of each organization utilizing this facility on a separate page. Yes / No _____

- k. If "yes" is selected under question 27, then is the equipment used to conduct the raffle drawing contracted or owned by the organization? (Select One or Both):
- Contracted Equipment
 Owned Equipment

Other (Explain): _____

If "contracted equipment" is selected under this particular question, then attach a copy of the current agreement for the equipment. Agreement attached? Yes / No _____

- l. If "yes" is selected under question 27, then the applicant must submit all pertinent information identified on page 16 of the application. Is the pertinent information attached to this application? Information attached? Yes / No _____

28. Is the social organization wishing to sell electronic pull-tabs and paper instant bingo, seal cards and/or pull-tabs in its social quarter? If "no," then please go to question 29 of this application. Yes / No _____

FOR ELECTRONIC PULL-TAB/ELECTRONIC GAMING DEVICE AND PAPER INSTANT BINGO, SEAL CARDS AND/OR PULL-TABS BY A SOCIAL ORGANIZATION (SOCIAL QUARTER ONLY)

- a. If "yes" is selected under question 28, then is the facility in which electronic pull-tabs and paper instant bingo, seal cards and/or pull-tabs are sold open only to the social organization's members and their guests? Yes / No _____

If "yes" is selected under this particular question, then please provide a copy of the social organization's membership requirements and copy of rules, which governs a member's guest. Copies attached? Yes / No _____

- b. If "yes" is selected under question 28, then is there controlled access to the facility where electronic pull-tabs and paper instant bingo, seal cards and/or pull-tabs are sold? Yes / No _____

If "yes" is selected under this particular question, then please provide an explanation on a separate page on how the organization is controlling access to the facility. Page attached? Yes / No _____

CHARITABLE GAMING ACTIVITIES

- c. If "yes" is selected under question 28, then does the social organization (i) exclusively and entirely leased the facility; or (ii) own and has title to the facility where the electronic pull-tabs and paper instant bingo, seal cards and/or pull-tabs are to be sold? (Select One):
- Exclusively & Entirely Leased Facility
 Owned Facility

If either "exclusively and entirely leased facility" or "owned facility" is selected under this particular question, then is the facility located within the (i) county, city or town in which of the social organization's principal office, as registered with the State Corporation Commission; or (ii) an adjoining county, city or town of the social organization's principal office? Yes / No _____

If either "leased facility" or "owned facility" is selected under this particular question, then is the organization (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? Yes / No _____

If either "leased facility" or "owned facility" is selected under this particular question, then does the **establishment** have an ABC license granted to it pursuant to Chapter 2 (§ 4.1-200 et seq.) of Title 4.1 of the *Code of Virginia*? Yes / No _____

If "yes" is selected under this particular question, then is the social organization wishing to sell electronic pull-tabs and paper instant bingo, seal cards and/or pull-tabs (i) at an **establishment** that has been granted an ABC license pursuant to Chapter 2 (§ 4.1-200 et seq.) of Title 4.1 of the *Code of Virginia* and (ii) such ABC license is held by the social organization? Yes / No _____

If "yes" is selected under this particular question, then please provide a copy of the ABC license granted to the social organization pursuant to Chapter 2 (§ 4.1-200 et seq.) of Title 4.1 of the *Code of Virginia*. Copy attached? Yes / No _____

If either "exclusively and entirely leased facility" or "owned facility" is selected under this particular question, then is the facility used by more than one organization for the purpose of conducting charitable gaming activities? If "yes," is selected under this question, then please provide the name of each organization utilizing this facility on a separate page. Yes / No _____

If "exclusively and entirely leased facility" is selected under this particular question, then attach a copy of the current lease for the facility where the electronic pull-tabs and paper instant bingo, seal cards and/or pull-tabs are sold by the social organization. Lease attached? Yes / No _____

If "exclusively and entirely leased facility" is selected under this particular question, then please provide the following information on the landlord.

Landlord's Corporate Name: _____

Landlord's Name: _____
First Name Middle Name Last Name

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax Number: _____

If "exclusively and entirely leased facility" is selected under this particular question, then is there any other organization leasing the same facility? Yes / No _____

- d. If "yes" is selected under question 28, then list the name of all manufacturers and/or suppliers who have offered and/or sold electronic pull-tabs and paper instant bingo, seal cards and/or pull-tabs to your social organization, or who the social organization anticipates obtaining them from.

Manufacturer's/Supplier's Name: _____

Manufacturer's/Supplier's Name: _____

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 **and** 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 *Code of Virginia*, 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.

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?

(Select One or Both):

- Contract Equipment
 Owned Equipment

Other (*Explain*): _____

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 **and** 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 **and** 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 **and** (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 **and** 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 *Code of Virginia*?

Yes / No _____

29. Is the organization wishing to operate and conduct electronic pull-tabs/electronic gaming in the public space of a social organization? If "no," then please go to question 30 of this application.

Yes / No _____

FOR ELECTRONIC PULL-TAB/ELECTRONIC GAMING DEVICE BY AN ORGANIZATION IN THE PUBLIC SPACE OF A SOCIAL ORGANIZATION

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?

If "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 _____

CHARITABLE GAMING ACTIVITIES

- b. If "yes" is selected under question 29, then is the facility used by more than one organization for the purpose of conducting charitable gaming activities? If "yes," is selected under this question, then please provide the name of each organization utilizing this facility on a separate page. Yes / No _____

Please provide the following information on the landlord.

Landlord's Corporate Name: _____

Landlord's Name: _____

First Name

Middle Name

Last Name

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax Number: _____

Is there any other organization leasing the same facility? Yes / No _____

- c. If "yes" is selected under question 29, then list the name of all manufacturers and/or suppliers who have offered and/or sold electronic pull-tabs to your organization, or who the organization anticipates obtaining them from.

Manufacturer's/Supplier's Name: _____

Manufacturer's/Supplier's Name: _____

Manufacturer's/Supplier's Name: _____

- d. If "yes" is selected under question 29, then will the organization contract or own the electronic pull-tab/electronic gaming device from a manufacturer? (Select One or Both): Contract Equipment
 Owned Equipment

Other (Explain): _____

If "contract equipment" is selected under this particular question, then attach a copy of the current agreement for the equipment. Agreement attached? Yes / No _____

- e. If "yes" is selected under question 29, then is the organization (i) intending to advertise or is advertising electronic pull-tabs/electronic gaming and/or (ii) intending to solicit or is soliciting the public to play on an electronic pull-tabs/electronic gaming device? Yes / No _____

- f. If "yes" is selected under question 29, then how many electronic pull-tab/electronic gaming devices will be located within the public space for the organization to operate and conduct?

As a reminder, pursuant to § 18.2-340.26:3 of the Code of Virginia, it states that the maximum number of electronic pull-tab/electronic gaming devices at a location is 18. Furthermore, pursuant to 11VAC20-20-60 (L) of the Charitable Gaming Regulations, an organization shall only use a device that bears a device tag affixed by the Department. _____

- g. If "yes" is selected under question 29, then is the public space where the organization intends to operate and conduct an electronic pull-tab/electronic gaming device separate from social organization's social quarter? Yes / No _____

Please provide a diagram of the facility and identify the (i) social organization's social quarter and (ii) public space. Diagram attached? Yes / No _____

- h. If "yes" is selected under question 29, then has the premises where the organization intends to operate and conduct electronic pull-tabs/electronic gaming has been deemed a common nuisance pursuant to § 18.2-258 of the Code of Virginia? Yes / No _____

30. Is the organization wishing to conduct an annual paper pull-tab event? If "no," then please go to question 31 of this application. Yes / No _____

FOR ANNUAL PAPER PULL-TAB EVENT ONLY

- a. If "yes" is selected under question 30, then the qualified athletic association, or booster club or a band booster club, which is created solely to raise funds for school-sponsored athletic or band activities for a public school or private accredited school (in accordance with § 22.1-19 of the Code of Virginia) or to provide scholarships to students attending such school wishing to conduct an annual paper pull tab event must submit all pertinent information identified on page 15 of the application. Is the pertinent information attached to this application? Yes / No _____

CHARITABLE GAMING ACTIVITIES

- b. If "yes" is selected under question 30, then does the organization own and has title to the facility or lease the facility where the annual paper pull-tab event 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 annual paper pull-tab event. Lease attached? Yes / No _____

If "leased facility" is selected under this particular question, then please provide the following information on the landlord.

Landlord's Corporate Name: _____

Landlord's Name: _____
First Name Middle Name Last Name

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax Number: _____

If "leased facility" is selected under this particular question, then please provide the following information on the facility.

Facility's Name: _____

Facility Manager's Name: _____
First Name Middle Name Last Name

Telephone: _____ Fax Number: _____

- c. If "yes" is selected under question 30, then list the name of all suppliers who have offered and/or sold paper instant bingo, seal cards and/or pull-tabs to your organization, or who the organization anticipates obtaining them from.

Supplier's Name: _____

Supplier's Name: _____

Supplier's Name: _____

- d. If "yes" is selected under question 30, then is the facility used by more than one organization for the purpose of conducting charitable gaming activities? If "yes," is selected under this question, then please provide the name of each organization utilizing this facility on a separate page. Yes / No _____

31. Is the organization wishing to conduct a Texas Hold'em poker tournament? If "no," then please go to question 32 of this application. Yes / No _____

FOR TEXAS HOLD'EM POKER TOURNAMENTS ONLY

- a. If "yes" is selected under question 31, then does the organization use or intend to use an operator to administer its poker tournament? If "yes," please complete the information below for the operator. Yes / No _____

Operator's Name: _____

If "yes" is selected under this particular question, attach a copy of the operator's current photo identification, such as a driver's license or other government-issued identification. Copy attached? Yes / No _____

If "yes" is selected under this particular question, attach a copy of the operator's internal control policies that comply with criteria established in 11VAC20-30-60 O. Copy attached? Yes / No _____

If "yes" is selected under this particular question, attach a copy of the written contract with its operator that complies with 11VAC20-30-180. Copy attached? Yes / No _____

If "yes" is selected under this particular question, does the qualified organization, member of the qualified organization, person affiliated or associated with the qualified organization, or immediate family member or person residing in the household of a member of the qualified organization or of a person affiliated or associated with the qualified organization directly or indirectly have any interest or ownership in, or receive compensation from, an operator with which the qualified organization contracts to administer its poker tournament? Yes / No _____

If "no" is selected under this particular question, then provide the designation and identity of the organization's game manager who shall be responsible for the operation and conduct of the poker tournament for the qualified organization and a copy of a current photo identification of the game manager, such as a driver's license or other government-issued identification.

Information below complete and copy attached? Yes / No _____

Individual's Name: _____
First Name Middle Name Last Name

Individual's Designation: _____

- b. If "yes" is selected under question 31, then does the organization (i) lease the facility; or (ii) own and has title to the facility where the bingo session is be conducted? (Select One): Leased Facility Owned Facility

If either "leased facility" or "owned facility" is selected under this particular question, then is the facility located within the (i) county, city or town in which of the organization's principal office, as registered with the State Corporation Commission; or (ii) an adjoining county, city or town of the organization's principal office? Yes / No _____

If either "leased facility" or "owned facility" is selected under this particular question, then is the organization (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; and (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? Yes / No _____

If either "leased facility" or "owned facility" is selected under this particular question, then is the facility used by more than one organization for the purpose of conducting charitable gaming activities? If "yes," is selected under this question, then please provide the name of each organization utilizing this facility on a separate page. Yes / No _____

If "leased facility" is selected under this particular question, then attach a copy of the current lease for the facility where the bingo session is to be conducted by the organization. Lease attached? Yes / No _____

If "leased facility" is selected under this particular question, does the qualified organization, member of the qualified organization, person affiliated or associated with the qualified organization, or immediate family member or person residing in the household of a member of the qualified organization or of a person affiliated or associated with the qualified organization directly or indirectly receive any payment from the landlord of the facility where the poker tournament occurs or from the agents, employees, immediate family members, or persons residing in the household of the landlord (unless such payment is directly related to a written contract to lease a facility for use to hold a poker tournament as required by 11VAC20-20-120 A and such payment is made by check or electronic fund transfer from the landlord directly to the qualified organization's charitable gaming account)? Yes / No _____

If "leased facility" is selected under this particular question, then please provide the following information on the landlord.

Landlord's Corporate Name: _____

Landlord's Name: _____
First Name Middle Name Last Name

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax Number: _____

- c. If "yes" is selected under question 31, attach a sample of the badge that meets the criteria established in 11VAC20-30-60 Q Copy attached? Yes / No _____

- d. If "yes" is selected under question 31, then the qualified organization shall ensure that all persons, including the operator's employees, independent contractors, volunteers, or agents, involved in the management, operation, conduct, or administration of a poker tournament are trained in the use of any equipment, on the policies and procedures relevant to the person's function, on the person's responsibilities, on the poker game, and on the Charitable Gaming Law, 11VAC20-30, and 11VAC20-20. Please provide a copy of the training course to be approved in advance by the department. Copy attached? Yes / No _____

32. Name of individual responsible for 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 stored and the contact person responsible for these records?

Physical Address: _____

City: _____ State: _____ Zip Code: _____ Telephone: _____

Contact Person's Name: _____
First Name Middle Name Last Name

Fax Number: _____

34. Does the organization pay or anticipate paying any bingo caller or bingo manager for participating in the organization's charitable gaming activities? If "yes," please complete the information below for each individual. Use additional page, if necessary. Yes / No _____

a. Individual's Name: _____
First Name Middle Name Last Name Position Title (Select One or Both):
 Bingo Caller Bingo Manager

Registration Number (BMR/BCR#): _____

b. Individual's Name: _____
First Name Middle Name Last Name Position Title (Select One or Both):
 Bingo Caller Bingo Manager

Registration Number (BMR/BCR#): _____

CHARITABLE GAMING ACTIVITIES

35. Describe in detail how the funds derived from the organization's charitable gaming activities will be disbursed in accordance with those lawful religious, charitable, community or educational purposes.

36. Did the organization enter into any contract or agreement, whether verbal or written with a third-party to organize, coordinate, manage, operate, or conduct any of the organization's charitable gaming activities it wishes to conduct? Pursuant to § 18.2-340.33 (2) of the *Code of Virginia*, it states that "no qualified organization shall enter into a contract with or otherwise employ for compensation any person for the purpose of organizing, managing, or conducting any charitable games." For the purposes of this section, all compensation whether direct or indirect is prohibited to a third-party. Yes / No _____

FOR VOLUNTEER FIRE DEPARTMENTS AND RESCUE SQUADS EXEMPT FROM THE APPLICATION FEE UNDER § 15.2-955 OF THE CODE OF VIRGINIA

37. Is the organization currently recognized in accordance with § 15.2-955 of the *Code of Virginia* by an ordinance or resolution by a political subdivision where the organization is located as being part of the safety program of the political subdivision? Yes / No _____

38. Date the organization was recognized in accordance with § 15.2-955 of the *Code of Virginia* by an ordinance or resolution by a political subdivision where the organization is located as being part of the safety program of the political subdivision. _____
Month/Day/Year

39. Name of political subdivision that has recognized the applicant organization as being part of its safety program. _____
City, County or Town

40. Provide a copy of the dated ordinance or resolution issued by the above referenced political subdivision that designates the applicant organization as being part of the safety program of the political subdivision. Copies attached? Yes / 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:

<i>Quarterly Report Period</i>	<i>Quarterly Report Due Date</i>
January 1 - March 31	June 1
April 1 - June 30	September 1
July 1 - September 30	December 1
October 1 - December 31	March 1

<i>Annual Report Period</i>	<i>Annual Report Due Date</i>
January 1 through December 31	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

OFFICE/POSITION

(Please check the appropriate position box for the individual)

_____ President, Commander, Chief Executive Officer, Governor, Exalted Ruler or equivalent position	_____ Treasurer, Chief Financial Officer, Financial Officer or equivalent position
_____ Bingo Manager or Game Manager	_____ Charitable Host Representative

PERSONAL INFORMATION

Fill in each section in its entirety, legibly and enter your ~~SSN~~ SSN for all applications. Incomplete responses will delay processing of the application. If you do not have a middle name, then insert "NMN" (No Middle Name).

Full Name: _____ Office/Position Title: _____
Complete First Name Complete Middle Name Complete Last Name

Term of Office Holder: _____ Begin Term Date: _____ End Term Date: _____
Month/Date/Year Month/Date/Year

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 submit a Gaming Personnel Information Update Form for any changes 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 business days of the change or the discovery of the inaccuracy.

Signature: _____ Date: _____

Full Name: _____ Office/
Position Title: _____
Complete First Name Complete Middle Name Complete Last Name

DRAFT

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.

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 **Seller** must include:

_____ The purchasers name, complete address and contact telephone number.

_____ The matching sequential ticket number to the portion provided to the purchaser.

The portion that goes to the **Purchaser** must include, but is not limited to:

_____ The ticket number.

_____ The selling price of each ticket.

_____ The prize(s) to be awarded.

_____ 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 question 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 possession 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.
 - l. 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.