



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

General Instructions

- A. Use this application when applying for an charitable gaming permit, or charitable gaming permit and authorization.
B. Complete the entire application and all attachments.
C. Place "N/A" if item is not applicable. Please type or print all answers. Do not use pencil.
D. If needed, attach additional documents or explanation sheets.
E. 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).
F. Enclose a non-refundable (i) \$200 permit application fee, or (ii) \$200 permit and if a social organization, a \$200 authorization application fee for electronic gaming payable to: Treasurer of Virginia.
G. Retain a copy for your records.
H. Mail completed application, applicable fee, and all required attachments to: VDACS, Office of Charitable and Regulatory Programs, P.O. Box 526, Richmond, Virginia 23218.
I. Allow 45 days for processing a COMPLETE application.

ORGANIZATION INFORMATION

1. Organization's Federal Tax Payer Identification Number: _____ OCRP# (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 (City, County or Town): _____
Contact Person's Name: _____ Office/ Position Title: _____
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)	3	4
	501 (c) TYPE	10	8
		19	Other - Explain on separate page
10.	Type of Organization: (Mark an "X" by the appropriate box)	Type 1 _____	Type 6 _____
		Type 2 _____	Type 7 _____
	Please see page 13 of the application for additional information on the types of organization in order to make the appropriate selection.	Type 3 _____	Type 8 _____
		Type 4 _____	Type 9 _____
		Type 5 _____	Type 10 _____
	Other: (Explain) _____	Type 11 _____	Type 12 _____
		Type 13 _____	Type 14 _____
		Type 15 _____	
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).	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.	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?	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.)?	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.)	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.	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.)	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).	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?	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.		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?	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, Charitable Gaming Board or a court of competent jurisdiction to have been operated in violation of state law, local ordinance, or Board'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 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, Charitable Gaming Board or a court of competent jurisdiction to have been operated in violation of state law, local ordinance, or Board'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) | Electronic Pull-Tabs/ Electronic Gaming (Social Quarters) _____

Paper Instant Bingo, Seal Cards & Pull-Tabs (Social Quarters) _____

Standalone Raffle _____ Annual Pull-Tab Event _____ |
|---|---|
- Day(s) of the Week and/or Frequency of Gaming Activities: _____
- | | |
|--|---|
| Doors Open: _____ am/pm
("Doors open" cannot be more than two hours before "begin game time." This requirement only applies to bingo) | Doors Close: _____ am/pm
("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 |
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 these 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 "no" is selected under this particular question, then when did the organization begin conducting its bingo session at this particular facility location? Please provide the begin date. Begin Date _____

If either "leased facility" or "owned facility" is selected under this particular question, then is the organization an association of war veterans or auxiliary units thereof organized in the United States or a fraternal association or corporation operating under the lodge system? Yes / No _____

If either "leased facility" or "owned facility" is selected under this particular question, then does the establishment have a 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 its bingo session (i) at an establishment that has been granted a license pursuant to Chapter 2 (§ 4.1-200 et seq.) of Title 4.1 of the *Code of Virginia* and (ii) such license is held by the organization. Yes / No _____

If "yes" is selected under this particular question, then please provide a copy of the 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

Manufacturer's/Supplier's Name: _____

Manufacturer's/Supplier's Name: _____

Manufacturer's/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

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 14 of the application. Is the pertinent information attached to this application? Information attached? Yes / No _____

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

FOR ELECTRONIC GAMING & PAPER INSTANT BINGO, SEAL CARDS AND/OR PULL-TABS (SOCIAL QUARTERS)

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

If "yes" is selected under this particular question, then please provide a copy of the 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 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

<p>c. If "yes" is selected under question 28, then does the organization (i) exclusively and entirely leased the facility; or (ii) own and has title to the facility where the instant bingo, seal cards and/or pull-tabs are to be sold?</p> <p style="text-align: right; margin-right: 20px;"><i>(Select One):</i></p> <p>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 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?</p> <p>If either "leased facility" or "owned facility" is selected under this particular question, then does the establishment have a license granted to it pursuant to Chapter 2 (§ 4.1-200 et seq.) of Title 4.1 of the <i>Code of Virginia</i> ?</p> <p>If "yes" is selected under this particular question, then is the organization wishing to sell instant bingo, seal cards and/or pull-tabs (i) at an establishment that has been granted a license pursuant to Chapter 2 (§ 4.1-200 et seq.) of Title 4.1 of the <i>Code of Virginia</i> and (ii) such license is held by the organization.</p> <p>If "yes" is selected under this particular question, then please provide a copy of the license granted to the organization pursuant to Chapter 2 (§ 4.1-200 et seq.) of Title 4.1 of the <i>Code of Virginia</i> .</p> <p>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? <u>If "yes," is selected under this question, then please provide the name of each organization utilizing this facility on a separate page.</u></p> <p>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 instant bingo, seal cards and/or pull-tabs are sold by the organization.</p> <p>If "exclusively and entirely leased facility" is selected under this particular question, then please provide the following information on the landlord.</p> <p>Landlord's Corporate Name: _____</p> <p>Landlord's Name: _____</p> <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> <p>Physical Address: _____</p> <p>City: _____ State: _____ Zip Code: _____</p> <p>Telephone: _____ Fax Number: _____</p> <p>If "exclusively and entirely leased facility" is selected under this particular question, then is there any other organization leasing the same facility?</p>	First Name	Middle Name	Last Name	<p><input type="checkbox"/> Exclusively & Entirely Leased Facility</p> <p><input type="checkbox"/> Owned Facility</p> <p>Yes / No _____</p> <p>Yes / No _____</p> <p>Yes / No _____</p> <p><i>Copy attached?</i> Yes / No _____</p> <p>Yes / No _____</p> <p><i>Lease attached?</i> Yes / No _____</p> <p>Yes / No _____</p>
First Name	Middle Name	Last Name		
<p>d. If "yes" is selected under question 28, then list the name of all manufacturers and/or suppliers who have offered and/or sold <u>electronic</u> or <u>paper</u> instant bingo, seal cards and/or pull-tabs to your organization, or who the organization anticipates obtaining them from.</p> <p>Manufacturer's/Supplier's Name: _____</p> <p>Manufacturer's/Supplier's Name: _____</p> <p>Manufacturer's/Supplier's Name: _____</p>				
<p>e. If "yes" is selected under question 28, then will the organization use <u>electronic</u> pull-tab devices?</p> <p>If "yes" is selected under this particular question, then will the organization contract or own the <u>electronic</u> pull-tab device from a manufacturer?</p> <p>Other (<i>Explain</i>) : _____</p> <p>If "contract equipment" is selected under this particular question, then attach a copy of the current agreement for the equipment.</p>	<p>Yes / No _____</p> <p><i>(Select One or Both):</i></p> <p><input type="checkbox"/> Contract Equipment</p> <p><input type="checkbox"/> Owned Equipment</p> <p><i>Agreement attached?</i> Yes / No _____</p>			
<p>f. If "yes" is selected under question 28, then is the organization (i) intending to advertise or is advertising instant bingo, seal cards and/or pull-tabs; and/or (ii) intending to solicit or is soliciting the public to purchase instant bingo, seal cards and/or pull-tabs?</p>	<p>Yes / No _____</p>			
<p>g. If "yes" is selected under question 28, then how many <u>electronic</u> gaming or <u>electronic</u> pull-tab devices will be in the organization's social quarters?</p>	<p>_____</p>			

CHARITABLE GAMING ACTIVITIES

29. Is the organization wishing to sell electronic gaming or electronic pull-tabs on the premises of a social organization? If "no," then please go to question 30 of this application. Yes / No _____

FOR ELECTRONIC GAMING OR ELECTRONIC PULL-TABS ON PREMISES OF A SOCIAL ORGANIZATION

a. 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 _____

b. If "yes" is selected under question 29, then attach a copy of the current lease for the facility where the electronic gaming or electronic pull-tab devices are to be used by the organization. *Lease attached?* Yes / No _____

Please provide the following information on the landlord.

Landlord's Corporate Name: _____

Landlord's Name: _____

First Name	Middle Name	Last Name
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Physical Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax Number: _____

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 gaming or electronic pull-tab devices 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 use electronic pull-tab devices? Yes / No _____

If "yes" is selected under this particular question, then will the organization contract or own the electronic pull-tab 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 how many electronic gaming or electronic pull-tab devices will be in the organization's social quarters? _____

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

FOR ANNUAL 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 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 _____

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 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 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
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Physical Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax Number: _____

CHARITABLE GAMING ACTIVITIES

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: _____
Telephone: _____ Fax Number: _____

First Name	Middle Name	Last Name
_____	_____	_____

- c. If "yes" is selected under question 30, then list the name of all manufacturers and/or suppliers who have offered and/or sold electronic or paper instant bingo, seal cards and/or 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 30, then will the organization use electronic pull-tab devices during its annual pull-tab event? Yes / No _____

If "yes" is selected under this particular question, then will the organization contract or own the electronic pull-tab 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 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 _____

CHARITABLE GAMING ACTIVITIES

31. 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: _____

32. 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: _____

33. Does the organization pay or anticipate paying any 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#): _____

34. 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.

35. 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

36. 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 _____

37. 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

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

39. 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 and (3) 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.

Please complete this form 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	

PERSONAL INFORMATION

Answer each section in its entirety and enter your **FULL PROPER LEGAL NAMES** -- applications with initials or 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: _____
<small>Complete First Name Complete Middle Name Complete Last Name</small>	
Term of Office Holder: _____	Begin Term Date: _____ <small>Month/Date/Year</small>
	End Term Date: _____ <small>Month/Date/Year</small>
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 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. A local chamber of commerce; or

Type 15. 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 11VAC15-40-130 (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 1 - 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 11VAC15-40-80 (C) of the Charitable Gaming Regulations, it states, "[w]inning tickets and unsold tickets shall be maintained for three years from 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 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 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 pull-tab event.

ACTIVITY REQUIREMENTS

1. The organization must have a valid charitable gaming permit issued by OCRP, except as stated in § 18.2-340.23 (A) of the *Code of Virginia*.
2. Provide a copy of the rules of play that will be utilized in the conduct of the annual pull-tab event.
3. Provide the name of all individuals and/or suppliers from whom the organization anticipates obtaining the deals of instant bingo, pull-tabs or seal cards to your organization for its annual 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 pull-tab event, as required by question 29b of the application.
5. Provide a narrative describing the pull-tab event.
6. The qualified organization must ensure compliance with following requirements while conducting the annual pull-tab event:
 - a. In accordance with § 18.2-340.26:2 of the *Code of Virginia*, it requires the 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 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 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 instant bingo, pull-tab or seal card must be prominently posted.
 - f. No 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 instant bingo, pull tabs or seal cards from a licensed charitable gaming supplier.
 - h. The invoice for each instant bingo, pull tab or seal card being offered for sale or sold during the referenced annual pull-tab event shall be on the premises at all times listed on the permit.
 - i. Winning 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 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 instant bingo, pull tab or seal card ticket.
 - k. All 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 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 instant bingo, pull tab, and seal card games shall be inventoried at the close of the annual pull-tab event, and held in accordance with § 18.2-340.16 et seq. of the *Code of Virginia* and the Charitable Gaming Regulations.