LOTTERY LICENCE APPLICATION

LOCAL AUTHORITY RAFFLE Retail prize value not to exceed \$2,500.00

The Saskatchewan Liquor and Gaming Authority may issue a licence pursuant to subsection 207 (1)(b) of the *Criminal Code*, or may designate the Local Authority to issue the licenses, authorizing charitable or religious organizations to conduct and manage lottery schemes.

Provide a summary description of your organization, outlining the charitable or religious object(s) or purpose(s):

Name/Address of Organization:

*Legal name of organization:				
*Address:				
*City/Town:, SK *Postal Code:				
*Preferred method of communication (check only one):				
E-mail address:				
□ Fax Fax number:				
□ Mail				
Raffle Details				
*Number of tickets to be printed:				
*Price of each ticket or chance: \$				
Multiple ticket prices:				

*Ensure that your organization records how many tickets are sold as multi-priced or as singles.

*The total value of tickets printed and offered for sale cannot exceed 12 times the retail value of all prizes to be awarded.

Draws

Select how the lottery will be conducted and winners determined from one of the below:

50/50 Draw	🗌 Calendar Draw	\Box Derby	\Box Sports Draft	□ Elimination Draw
Honey Pot	Sports Pools	🗌 Rally	🗆 Regular Draw	7

Draw	Date of draw	Location of draw (name and address of facility)	Description of prizes	Retail prize value (including taxes)	Your cost (\$0 if donated, including taxes)
1					
2					
3					
4					
5					
Totals:				\$	\$

*If you require more space, please fill out information on a separate sheet and attach.

Contact

The contact person will be responsible for any correspondence pertaining to this licence and also for keeping and maintaining any records pertaining to this licence.

Lottery records must be kept and maintained in Saskatchewan. .

*First Name:	*Last Name:			
*Signature:				
*City/Town:	, SK *Postal Code:			
*Home Phone:	*Business Phone:			
*Preferred method of communication (check only one):				
🗆 E-mail E-ma	ail address:			
🗆 Fax 🛛 Fax 1	number:			
🗆 Mail				
Bank Account Information				
A separate lottery ac	ccount is NOT required, however, a separate deposit must be made for lottery proceeds.			
*Account Number:				

*Financial Institution:

Consent and Certification

I hereby consent, on behalf of the organization, to the Saskatchewan Liquor and Gaming Authority to release the following information to any person, under Section 5 & 24 of *The Freedom of Information and Protection of Privacy Act:*

- a. The organization's legal name, address and the number of the lottery licence issued to the organization.
- b. The charitable or religious object or purpose for which the organization states the proceeds from the lottery scheme will be used; and
- c. The amounts of all lottery scheme proceeds designated for each charitable or religious object or purpose.

I hereby certify on behalf of the organization, that all facts stated and information furnished are true and correct. The organization has read, understood and agrees to comply with all the terms and conditions.

*Signature on behalf of the organization:

*Date:_____

*Printed name:_____

*Position within the organization:_____

FINANCIAL REPORT FOR MUNICIPAL AUTHORITY RAFFLE LOTTERY

THIRD CHILL REPORT FOR MUNICIPAL AUT	INTERI INTERI
LICENCE NUMBER:	CODE:
ORGANIZATION NAME:	
MAILING ADDRESS:	
CITY/TOWN: POSTAI	CODE:
FOR THE LOTTERY COMPLETED	
PRICE PER TICKET/CARD	\$
GROSS SALES	\$
EXPENSES:	
PRIZES	\$
APPLICATION FEES	\$
ADVERTISING	\$
PRINTING	\$
RENTAL	\$
OTHER (SPECIFY)	\$
4	\$
TOTAL EXPENSES	\$
AMOUNT AVAILABLE FOR CHARITABLE OBJECT OR PURPOSE	\$
The undersigned hereby certifies that the proceeds of this lottery have l purpose as stipulated on the licence application and as approved.	been or will be used for the charitable object or
CERTIFIED CORRECT this date,	by two officers of the organization:
(Print Name and Position) (Signature)	(Telephone)

Records of this lottery will be maintained for at least three years at:

(Physical Location - Address in Full)

Mail	or	return	comp.	leted	report	to:	
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(Print Name and Position)

LOCAL AUTHORITY RESPONSIBLE FOR ISSUANCE OF LICENCE

(Telephone)

FOR OFFICE USE ONLY				
DATE:				
OFFICER:				

(Signature)