

GC-317

NYS Racing & Wagering Board
1 Broadway Center, Suite 600
Schenectady, NY 12305-2553
(518) 395-5400, fax #: (518) 347-1469

**APPLICATION TO REQUEST
THE DISBURSEMENT OF
GAMES OF CHANCE
PROCEEDS**



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- 1) Name of organization: _____
- 2) Mailing address: _____
- 3) Phone Number: _____
- 4) Games of Chance Identification #: _____
- 5) Name and address of officer(s) responsible for use of proceeds:
- | | | | |
|--------|---------|----------------|--|
| | | | |
| (Name) | (Title) | (Home Address) | (City, Town or Village) (State) (Zip Code) |
| | | | |
| (Name) | (Title) | (Home Address) | (City, Town or Village) (State) (Zip Code) |
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- 6) Amount of disbursement for which permission is sought: \$ _____
- 7) Describe purpose for which the proceeds will be used: _____

- 8) Total unexpended balance in Games of Chance Account(s): \$ _____
Provide a copy of your most recent bank statements. (Note: Include all related savings accounts and CDs)
- 9) Amount realized from the conduct of Games of Chance during the past calendar year: \$ _____
- 10) Have you used Games of Chance proceeds for this purpose in the past? _____ If so, how much: \$ _____
- 11) Has a previous application been filed for this or any other expenditure? _____
If yes, provide a copy of all NYS Racing and Wagering Board approval letters for the last four years.
- 12) List other sources of income and amounts per year: _____

- 13) Will any of the money you propose to spend be used to erect, equip, maintain or renovate a bar or bar room? _____
- 14) Have you solicited bids for the proposed project? _____ **(If yes, submit copies of at least two bids.)**
- 15) If proceeds are to be used for building repairs or new construction, give location of premises where repairs or construction will be done. _____
- 16) Does organization have title to its premises? _____ If not, furnish name of owner. _____
- 17) Has any real property of the organization been sold? _____
- 17a) If so, for how much and what disposition was made of the proceeds? _____

18) List other mortgages or conditional sales contracts outstanding against this property. _____

I hereby swear (or affirm) that I have read and am familiar with Board Rule 5624.21 and that the information and statements contained herein have been examined by me and to the best of my knowledge and belief are true, correct and complete.

(Signature)

(Print Name)

(Title)

(Date)

(Phone Number)

(Email Address)