NEW YORK STATE | Gaming Commission | Division of Charitable Gaming

BC-9 Financial Statement of Bingo Operations (Limited Period Bingo)

Instructions: Prepare report in duplicate. Within 15 **days** after each occasion, send original to the NYS Gaming Commission, a copy to the clerk of the municipality and retain one copy for your files.

Bingo Identification Number: _____ **Municipal License Number:** _____

Name of Organization: _____

Street Address: _____

City, Town or Village ***(circle one)*****:** _____ **Zip Code:** _____

Address where bingo was conducted, if different:

_____ Street Address | _____ Municipality | _____ Zip | _____ County

_____ Date of Occasion | _____ Hours of Occasion

	THIS OCCASION	TOTAL FROM LAST REPORT Date _____	TOTAL TO DATE
	a	b	c
A. NUMBER OF OCCASIONS	_____	_____	_____
B. NUMBER OF GAMES PLAYED	_____	_____	_____
C. RECEIPTS			
1. Total Cards Sold (_____ at _____ each)	_____	_____	_____
D. EXPENDITURES - *(Show only payments actually made)*			
1. Prizes (Exclude value of donated prizes)	_____	_____	_____
2. Equipment (List in Schedule 1)	_____	_____	_____
3. Rent (List in Schedule 1)	_____	_____	_____
4. Services (List in Schedule 1)	_____	_____	_____
5. License Fee (List in Schedule 1)	_____	_____	_____
6. Other Expenses (List in Schedule 1)	_____	_____	_____
7. Total Expenditures (List 1 to 6)	_____	_____	_____
E. NET PROFIT OR (LOSS)			
1. Profit (or Loss) Before Additional License Fee	_____	_____	_____
2. Additional License Fee (List in Schedule 1)	_____	_____	_____
3. Net Profit (or Loss)	_____	_____	_____

SCHEDULE 1 EXPENDITURES (List all payments summarized in Part D lines 2 to 6, Part D and Part E Line 2)

Check No.	Description of Expenditure	Name & Address of Payee	Amount
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____
_____	_____	_____	$_____

Cards Purchased From: _____ _____ _____
Name Address Supplier License Number

Number of cards on hand at beginning of this occasion _____

Subtract the number of cards sold during this occasion _____

Number of cards on hand at end of this occasion _____

List serial numbers of each carton of cards purchased _____

_____

This occasion was inspected by a State Investigator _____ Municipal Investigator _____

If so, give Name(s) _____

F. DISPOSITION OF AND ACCOUNTING FOR NET PROCEEDS:

1. If this is organization's first occasion, give opening balance, if any, in the **Special Bingo Account:** $_____
   Source of Opening balance: _____
2. Unexpended balance of net proceeds shown on last report: $_____
3. Net Profit (or Loss) from this occasion *(Part E, Line 3)*: $_____
4. Interest earned on net proceeds on deposit in interest bearing account(s): $_____
   $_____
5. Other deposits into Special Bingo Account:
   Explanation: _____
6. Total Net proceeds *(Add Lines 1 through 5)*: $_____

7. Disbursements of Net Proceeds since last report: (Attach additional sheets if necessary)

Date	Check No.	Description of Disbursements	Name & Address of Payee	Amount
_____	_____	_____	_____	$_____
_____	_____	_____	_____	$_____
_____	_____	_____	_____	$_____
_____	_____	_____	_____	$_____
_____	_____	_____	_____	$_____

7. Total Disbursements: $_____

8. Unexpended balance of net proceeds *(Line 6 less Line 7)*: $_____

9. Name and address of bank where special bingo account is maintained:

_____

Title of Account: _____

10. Transfers made of net proceeds into interest bearing account(s) $_____
Account number, name and address of bank where account is maintained: *(Amount must be included in Item 8, above)*

_____

_____

11. Name, address and phone number of member responsible for use of proceeds: _____

_____

G. MEMBERS CONDUCTING GAMES

NAME AND ADDRESS OF MEMBER IN CHARGE	NAME AND ADDRESS OF CALLER	NAME AND ADDRESS OF CALLER'S ASSISTANT
_____	_____	_____
_____	_____	_____
_____	_____	_____

H. DECLARATION: This Declaration must be completed.

I declare, subject to the penalties of perjury, that I was the Member in Charge of the bingo occasion conducted by the licensee herein on the _____ day of _____, 20____. That I personally supervised the said occasion, that I have read the foregoing statement and know the contents thereof; that this statement is true to the best of my knowledge and belief.

Signed: _____ Print: _____ Date: _____