MAJOR LEAGUE SPORTS RAFFLE
ELIGIBLE ORGANIZATION RAFFLE REPORT

PLEASE SEND COMPLETED REPORT TO:
Bureau of Gambling Control
P. O. Box 168024
Sacramento, CA 95816-8024
Phone: 916-830-1700

Raffle Report Period: ☐ Season or ☐ Calendar Year Dates: _____

Eligible Organization's Name: _____

Eligible Organization's Registration Number: _____

Pursuant to Penal Code section 320.6, subdivision (*o*)(13)(A), once registered, an eligible organization shall file with the Department of Justice, each season or year thereafter, a report that includes all of the following information. Pursuant to Penal Code section 320.6, subdivision (*o*)(13)(B), failure to submit the seasonal or annual report shall be grounds for denial of an annual registration and for the imposition of penalties under Government Code section 12591.1.

SECTION 1: SEASON OR ANNUAL RAFFLE TOTALS			
Total number of raffles conducted for the season or calendar year.		The gross receipts generated from the sale of raffle tickets for the season or calendar year.	
The average per raffle gross receipts generated from the sale of raffle tickets for the season or calendar year.		The prize total for the season or calendar year, including any prize that was not claimed.	
The average per-raffle prize total for the season or calendar year, including any prize that was not claimed.		The prize total that was not claimed, if any, during the season or calendar year.	

For each raffle in which the raffle prize was not claimed, list the name of the eligible recipient organization that received the prize (attach additional sheets, if needed).

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SECTION 2: COST RELATED INFORMATION				
Provide a total of the direct costs of conducting the raffles for:				
Labor	Consulting	Software	Marketing	Raffle Equipment

Provide a schedule of vendors used to operate the raffles and total payments made to each vendor. (Attach additional sheets if needed.)	Amount Paid

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SECTION 3: FOR EACH RAFFLE EVENT PLEASE PROVIDE THE FOLLOWING INFORMATION (attach additional sheets, if needed)						
Registered Event ID#	Event Date	Benefitting Organization (Eligible Organization or Eligible Recipient Organization)	Gross Receipts Generated by the Sale of Raffle Tickets	Amount Each Organization Received	Winning Ticket Number	Prize Status (Claimed/ Unclaimed)

CERTIFICATION

I declare under penalty of perjury under the laws of the State of California that the foregoing information is true, correct, and complete.

First Name Last Name Middle Initial

Fiduciary's Printed Name _____ _____ _____

Fiduciary's Signature: _____ Date: _____

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Privacy Notice on Data Collection Forms

As Required by Civil Code § 1798.17

Collection and Use of Personal Information

The Division of Law Enforcement, Bureau of Gambling Control in the Department of Justice collects the information requested on this form as authorized by California Penal Code section 320.6. The Bureau uses this information to establish grounds for the license, permit or other approval indicated on this application form. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The Department of Justice's general privacy policy is available at http://oag.ca.gov/privacy-policy.

Providing Personal Information

All the personal information requested in this form must be provided.

Access to Your Information

You may review the records maintained by the Division of Law Enforcement, Bureau of Gambling Control in the Department of Justice that contain your personal information as permitted by the Information Practices Act. (See below for contact information.)

Possible Disclosure of Personal Information

In order to process your application, we may need to share the information you give us with law enforcement or regulatory agencies.

The information you provide may also be disclosed in the following circumstances:

- With other persons or agencies where necessary to perform their legal duties, and their use of your information is compatible and complies with state law, such has for investigations or for licensing, certification, or regulatory purposes;

- To another government agency as required by state or federal law.

Contact Information

For questions about this notice or access to your records, you may contact the Special Agent Supervisor of Special Programs at the Department of Justice, Bureau of Gambling Control, at P. O. Box 168024, Sacramento, CA 95816-8024, (916) 830-1700 or e-mail at GamblingControl@doj.ca.gov