



STATE OF WASHINGTON

GAMBLING COMMISSION

"Protect the Public by Ensuring that Gambling is Legal and Honest"

FUND-RAISING EVENT RECORDS PACKET

This packet contains the prescribed forms required as the basis of your fund-raising event records as set forth in WAC 230-09-040, 230-09-045, 230-09-50, and 230-09-055. These records must be maintained for all activities conducted at each fund-raising event.

We have included a quantity of forms that should be sufficient for most events. If the supply is inadequate for your particular event, you may request the necessary additional forms from the Commission. Also included is a shortened version of the rules manual which should be kept available during the fund-raising event per WAC 230-06-060.

Submit only the ORIGINAL Fund-Raising Event Report to the Commission, no later than 30 days following the day(s) of the event. KEEP the COPY of the report together with all other Fund-Raising Event records as part of your organization's records for a period of not less than three years. See the enclosed packet for more detailed instructions regarding record keeping and reporting requirements.

Additionally, new licensees should contact their local county or city treasurer for details regarding taxation of authorized gambling activities within your particular area, as specified in RCW 9.46.110. MOST require some type of registration prior to commencement of your gambling activity(ies).

If you have any questions, or need assistance, please call the Gambling Commission office in your area:

Everett..... (425) 304-6300

Tacoma (253) 671-6280

Spokane (509) 325-7900

Enclosures

FUND-RAISING RECORDS PACKET

LIST OF CONTENTS

IMPORTANT: PLEASE EXAMINE THE CONTENTS OF YOUR FUND-RAISING EVENT (FRE) PACKET PRIOR TO THE DATE OF YOUR EVENT. CHECK THE PACKET TO INSURE THAT YOU HAVE RECEIVED THE FORMS YOU ARE REQUIRED TO PREPARE AND MAINTAIN FOR YOUR EVENT.

Your Fund-Raising Event packet should contain the following:

1. Fill Receipts (GC2-113) – 3 Pads (50 Each)
2. Count Slips (GC2-114) – 2 Pads (100 Each)
3. Game Control Sheets (GC2-115) – 1 Pad (25 Each)
4. Central Accounting System:
 - A. Instructions with Completed Examples
 - B. Game Revenue Summary (GC2-116)
 - C. Count and Reconciliation of Cash and Chips (GC2-117)
 - D. Record of Distribution of Net Receipts > \$10,000 (GC2-117a)
5. Pull-Tab Income Summary with Instructions (GC2-220)
6. Schedule of Winners (GC2-329)
7. List of Workers (GC2-235)
8. Activity Report – To Be Completed and Returned (GC2-136a)
9. Problem Gambling Sign to be Posted on the Premises.
10. Poker Tournament Players Chip/Entry Fee Purchase Record (GC2-181)
11. Poker Tournament Winners Prize Record (GC2-180)
12. Poker Tournament Summary (GC2-182)

IF YOU ARE ONLY HAVING A POKER TOURNAMENT USE ONLY ITEMS 7-12 ABOVE.

NOTE: Your Fund-Raising Event packet contains the Fund-Raising Event Activity Report form you are required to complete and submit to the commission. This is the only form submitted to the Gambling Commission. Retain all others for your records. Please mail your Activity Report in the green envelope provided. The report is due 30 days after your event.

If you are missing any of the above required forms, please contact licensing services section at (360) 486-3440 as soon as possible to allow time for us to furnish the forms prior to your event.

SOME IMPORTANT DOs AND DON'Ts

DO:

1. READ the instructions and rules.
2. Ask a commission staff member for help if you don't understand something. Remember it is your organization's money and licenses at risk.
3. Be sure you understand the \$10,000 limitation and know what your net receipts were for any previous event during the current CALENDAR year. Remember, you must not exceed \$10,000 total net receipts during a CALENDAR year.
4. Have supplies of pencils, paper, scotch tape, rubber bands, calculators, etc., on hand BEFORE the event begins.
5. Have adequate personnel and be sure they understand their duties.
6. Be sure each table is numbered and has a lock box. Have an extra lock box or two available in the count room to exchange for the one(s) being picked up.
7. Be sure the rules for playing are posted, including your plan to give away all net receipts in excess of the \$10,000 limitation.
8. Count the beginning and ending bankrolls and obtain the REQUIRED verifying signatures.
9. Use the fill receipts and count slips in sequence to document ALL movement of money and chips. Be sure to double check all counts of monies received in the count room and carefully record the amounts received on the count slips.
10. Provide each dealer with a 15 to 20 minute break each hour.
11. Encourage your dealers not to drink while working the event. Intoxicated (and tired) dealers are a player's delight.
12. Remember to file your Fund-Raising Event Activity Report with the commission within 30 days of your event.
13. ***HAVE AN ENJOYABLE AND PROFITABLE EVENT.***

DO NOT:

1. Exceed the \$10,000 limit on annual net receipts. This means you may not exceed \$10,000 for any single event or as the total for all events held during a calendar year.
2. Leave a dealer at a table for more than 40 to 45 minutes. Remember, if you let them get too tired, they will not be able to recover during a break. Tired (and intoxicated) dealers can cost your organization a lot of money.
3. Transfer money between gambling tables. Route all transactions through the count room and cashier.

OPERATIONAL INSTRUCTIONS FOR USING THE FRE ACCOUNTING SYSTEM

1. Obtain the beginning bankroll. (If the only activity at your Fund-Raising Event is a Poker Tournament skip to that section on the next page.)
2. Count it and enter the beginning amounts on the **Count and Reconciliation of Cash and Chips** (GC2-117). Two people must count and sign the verification of the beginning bankroll.
3. Assign a number to each table or gambling activity.
4. Be sure each table or gambling activity has a lock box in place. Be sure to have at least one empty lock box available in the count room to exchange for one being picked up. It will be easier to determine where a lock box has been located if a slip of paper is placed inside with the assigned table number on it.
5. Prepare a chip/change tray for each table or gambling activity.
6. Prepare a **Fill Receipt** (GC2-113) for each tray before it is taken to the table or game. Use the **Fill Receipts** (GC2-113) in sequence and fill them out completely including the proper initials as required. The **original** (white copy) remains with the count room after the amount is verified and initialed by the runner. The **yellow copy** goes with the tray to the game table and is placed in the lock box after the dealer verifies the amount received and initials the copy. Retain all voided fill receipts.
7. A **Fill Receipt** (GC2-113) is prepared in the same way each time money or chips are taken from the count room to a game table.
8. Money or chips are **NEVER** to be transferred between game tables. If a table has excess coins or chips, they should be put into the lock box to be taken back to the count room. All additional money or chips brought to a table must come from the count room and must be accompanied by a fill receipt.
9. Prepare a **Game Control Sheet** (GC2-115) for each table or gambling activity.
10. Post each **Fill Receipt** (GC2-113) to the proper **Game Control Sheet** (GC2-115). Put an initial or check mark on each **Fill Receipt** (GC2-113) after it is posted so you will know it has been posted.
11. Maintain the posted **Fill Receipts** (GC2-113) in numerical sequence.
12. Prepare a **Count Slip** (GC2-114) each time a lock box or change tray is returned to the count room. Use them in numerical sequence just as you do the **Fill Receipts** (GC2-113). Be sure to carefully count and record all monies received. These should be double checked for accuracy. Retain all voided count slips.
13. When the lock boxes are brought in, they will contain the yellow copies of the **Fill Receipts** (GC2-113). These should be sorted into numerical sequence and matched against the original white copies. Be sure to account for all copies.
14. Post each **Count Slip** (GC2-114) to the proper **Game Control Sheet** (GC2-115) just as you do the **Fill Receipts** (GC2-113). **CAUTION:** Be sure to post the **Count Slips** (GC2-114) and **Fill Receipts** (GC2-113) in the proper column on the count room **Game Control Sheets** (GC2-115).

15. Maintain the accumulated net receipts column on each **Game Control Sheet** (GC2-115) by adding each amount received from the game and subtracting each amount sent to the game. The comments column can be used to note any significant occurrences during the event relating to each game.
16. At the conclusion of the event, prepare a **Count Slip** (GC2-114) for each chip/change tray and each lock box brought in. Post them to the proper **Game Control Sheet** (GC2-115).
17. Be sure to account for all **Fill Receipts** (GC2-113) and **Count Slips** (GC2-114) including any that are unused.
18. Complete each **Game Control Sheet** (GC2-115) and post the totals from each to the **Game Revenue Summary** (GC2-116).
19. Complete the **Game Revenue Summary** (GC2-116) to determine the net receipts or loss from the event for comparison with the net receipts based on the count of the actual cash and chips on hand.
20. Count all of the cash and chips on hand at the conclusion of the event and enter the ending amounts on the **Count and Reconciliation of Cash and Chips** (GC2-117). Complete the cash and chips reconciliation and obtain the verifying signatures for the ending bankroll.
21. The information contained on the **Game Revenue Summary** (GC2-116) and the **Count and Reconciliation of Cash and Chips** (GC2-117) provide everything except the details of your expenses needed to complete the fund-raising event report. The report must be submitted to the Gambling Commission within thirty days of the conclusion of your event.
22. Send only the original of the fund-raising event report to the Gambling Commission. **DO NOT** send your detailed records. They are to be kept as part of your organization's records for at least three years following the end of the current fiscal year.
23. Deposit the ending cash in the bank at the conclusion of the event and attach the validated deposit slip to your records. Do not pay any expenses from the ending cash before making the deposit. All expenses should be paid by check.

POKER TOURNAMENT ONLY:

1. Complete the **Poker Tournament Players Chip / Entry Fee Purchase Record** (GC2-181) for initial chip purchase (buy-in) and any additional chip purchases (re-buys) if allowed.
2. Complete **Poker Tournament Winners Prize Record** (GC2-180) for all tournament prizes awarded.
3. Complete **Poker Tournament Summary** (GC2-182) with totals from **Poker Tournament Players Chip / Entry Fee Purchase Record** (GC2-181) and **Poker Tournament Winners Prize Record** (GC2-180).
4. Complete the Fund-Raising Event Activity Report and send the original to the Gambling Commission. Keep a copy of the Report along with the originals of the other records for at least three years.
5. Deposit all money from the **Poker Tournament Players Chip / Entry Fee Purchase Record** (GC2-181) in the bank (less any cash prizes paid) within two banking days. Do not pay expenses from ending cash before depositing.

FUND-RAISING EVENT CENTRAL ACCOUNTING SYSTEM

The attached packet includes eight basic forms that must be included in the records of your fund-raising event. You may expand your record keeping beyond these basic requirements, but you **MUST**, as a minimum, utilize this basic package.

These basic records will provide the information you will need to prepare your fund-raising event report that must be sent to the commission no later than 30 days following the date of your event. **DO NOT, however, send your detailed records to the commission.** Keep them as part of your organization's records for a period of not less than three years following the end of the current fiscal year.

The eight basic forms consist of:

1. Fill Receipts (GC2-113)
2. Count Slips (GC2-114)
3. Game Control Sheets (GC2-115)
4. Game Revenue Summary (GC2-116)
5. Count and Reconciliation of Cash and Chips (GC2-117)
6. Record of Distribution of Net Receipts in Excess of \$10,000 (GC2-117a)
7. Pull-Tab Income Summary (If Pull-Tabs Are Conducted) (GC2-220)
8. List of Workers (GC2-235)

1. **Fill Receipts** are pre-numbered and must be used in sequence. All copies provided must be maintained as part of your records whether they have been used or not. **Fill Receipts** must be prepared in duplicate for each transfer of money to a gaming table. The runner will initial the receipt after verifying the amount of money (or chips) being sent to the table. The original white copy of the receipt will remain with the preparer and the yellow copy will go to the game table with the money and chips. The dealer will verify the amount, initial the yellow copy of the receipt, and place the yellow copy in the lock box.
2. **Count Slips** are also pre-numbered and must be used in sequence. As with **Fill Receipts**, keep all copies provided as part of your records. **Count Slips** must be prepared for all transfers from the gaming tables to the count room. Prepare a **Count Slip** each time a lock box or change tray is brought to the count room.
3. The **Game Control Sheets** will be used to record the transfers of money to and from each gaming table. Prepare a **Game Control Sheet** for each gaming table operated. Post each **Fill Receipt** and **Count Slip** to the appropriate **Game Control Sheet**.
4. The **Game Revenue Summary** is used to accumulate the totals from each **Game Control Sheet** and the receipts from other activities such as bingo, raffles, lotteries, and drawings. This form will not be used until the end of the day or event. It provides the information on the event's net receipts needed for the cash and chip reconciliation and to prepare the fund-raising event report for submission to the commission.
5. The **Count and Reconciliation of Cash and Chips** is designed to help you count the beginning and ending bankrolls. The final section (cash and chip reconciliation) compares the actual cash with the records of the event to determine whether or not there is an overage or shortage. Notice that spaces are provided for the **REQUIRED** signatures of the person verifying the beginning and ending bankrolls. Two people will verify the beginning amount and three people must verify the ending amount.
6. The **Record of Distribution of Net Receipts in Excess of \$10,000** must be completed and retained as part of the records of your fund-raising event if you have to distribute any net receipts in excess of the \$10,000 limitation, as defined by WAC 230-09-010, to the participants of your event.
7. The **Pull-Tab Income Summary** is required if pull-tabs are sold at your fund-raising event. Please read the instructions provided on the back of the form carefully.
8. The **List of Workers** must include the name, address, phone number and type of membership held in your organization as required by WAC 230-09-075.



29276

WASHINGTON STATE GAMBLING COMMISSION

POST OFFICE BOX 42400

OLYMPIA, WA 98504-2400 — (360) 486-3474

Class:

City:

FUND RAISING EVENT REPORT

Date:

DATES ACTIVITIES WERE HELD

Ye Olde Fraternal Organization

SAMPLE

Due Date

Please complete the following items: (See attached instructions.) Include only items DIRECTLY RELATED to your Fund Raising Event. PLEASE ROUND ALL AMOUNTS TO THE NEAREST WHOLE DOLLAR.

(1) GAMBLING REVENUE (Loss) PER RECORDS:

Table with columns for NET RECEIPTS, GROSS RECEIPTS, and PRIZES PAID. Rows include (A) BLACK JACK, (B) CHUCK-A-LUCK, (C) 4-5-6, (D) BEAT THE DEALER, (E) WHEEL OF FORTUNE, (F) CRAPS, (G) BEAT MY SHAKE, (H) ROULETTE, (I) HORSE RACE, (J) OTHER, (K) BINGO, RAFFLES, LOTTERIES, AND DRAWINGS, and (L) PULL TABS.

(2) NET RECEIPTS (Loss) per records (Total (A) through (L) above)
(3) ADJUSTMENTS TO NET RECEIPTS:
EXCESS OVER \$10,000 (See reconciliation below)
(4) TOTAL ADJUSTED NET RECEIPTS (Loss) FOR THIS EVENT - NOT TO EXCEED \$10,000

EXPENSES:

(5) GAMBLING LICENSE FEE
(6) SUPPLIES
(7) TAXES - LOCAL (City / County)
- STATE (incl. B&O tax)
- FEDERAL
(8) BUILDING RENT
(9) EQUIPMENT - Rent / Purchases / Depreciation (circle any that apply)
(10) UTILITIES (Include telephone)
(11) ADVERTISING
(12) CONTRACT SERVICES (Security, accounting, janitorial, etc.)
(13) (OVER) / SHORT (Circle one - over in brackets. Deduct overage from expenses)
(14) OTHER EXPENSES (Attach a detailed list)
(15) TOTAL EXPENSES (Add items 5 through 14)
(16) NET INCOME (Deduct item 15 from 4)

ANNUAL NET RECEIPTS RECONCILIATION

COMPLETE THIS SECTION ONLY IF YOU HAD A PRIOR FUND RAISING EVENT THIS CALENDAR YEAR

NET RECEIPTS (Loss) PER RECORDS (Item 2)
ADD ADJUSTED NET RECEIPTS FROM PRIOR EVENT HELD THIS YEAR (Item 4)
TOTAL ANNUAL NET RECEIPTS (Total of above 2 lines)
LESS ANNUAL LIMITATION
EXCESS ANNUAL NET RECEIPTS (If positive, distribute amount and record on Item 3)

DO NOT SEND MONEY WITH THIS REPORT

Signature and Verification: I declare under the penalties of perjury that this report (including any accompanying statements or lists) has been examined by me and to the best of my knowledge and belief is true, correct, and complete.

(17) The Big Guy President (206) 555-1234 8 / 5 / XX
(18) (Print Name of Preparer) (Business Name) (Daytime Telephone) (Date)

WASHINGTON STATE GAMBLING COMMISSION
FUND-RAISING EVENT

FILL RECEIPT **NO 9540**

Date: 7/29/XX Time: 4:00 PM

\$ 200.00 To Table No.: 1

Prepare in duplicate: Received by (INITIALS):

Leave **ORIGINAL** with Cashier. Runner: L.L.

Place **COPY** in lock box at table. Dealer: _____

GC2-113 (Rev. 11/01)

WASHINGTON STATE GAMBLING COMMISSION
FUND-RAISING EVENT

FILL RECEIPT **NO 9540**

Date: 7/29/XX Time: 4:00 PM

\$ 200.00 To Table No.: 1

Prepare in duplicate: Received by (INITIALS):

Leave **ORIGINAL** with Cashier. Runner: L.L.

Place **COPY** in lock box at table. Dealer: Y.B.

GC2-113 (Rev. 11/01)

WASHINGTON STATE GAMBLING COMMISSION
FUND-RAISING EVENT

FILL RECEIPT **NO 9541**

Date: 7/29/XX Time: 6:35 PM

\$ 120.00 To Table No.: 1

Prepare in duplicate: Received by (INITIALS):

Leave **ORIGINAL** with Cashier. Runner: L.L.

Place **COPY** in lock box at table. Dealer: _____

GC2-113 (Rev. 11/01)

WASHINGTON STATE GAMBLING COMMISSION
FUND-RAISING EVENT

FILL RECEIPT **NO 9541**

Date: 7/29/XX Time: 6:35 PM

\$ 120.00 To Table No.: 1

Prepare in duplicate: Received by (INITIALS):

Leave **ORIGINAL** with Cashier. Runner: L.L.

Place **COPY** in lock box at table. Dealer: Y.B.

GC2-113 (Rev. 11/01)

WASHINGTON STATE GAMBLING COMMISSION
FUND-RAISING EVENT

FILL RECEIPT **NO 9542**

Date: 7/29/XX Time: 9:15 PM

\$ 200.00 To Table No.: 1

Prepare in duplicate: Received by (INITIALS):

Leave **ORIGINAL** with Cashier. Runner: L.L.

Place **COPY** in lock box at table. Dealer: _____

GC2-113 (Rev. 11/01)

WASHINGTON STATE GAMBLING COMMISSION
FUND-RAISING EVENT

FILL RECEIPT **NO 9542**

Date: 7/29/XX Time: 9:15 PM

\$ 200.00 To Table No.: 1

Prepare in duplicate: Received by (INITIALS):

Leave **ORIGINAL** with Cashier. Runner: L.L.

Place **COPY** in lock box at table. Dealer: Y.B.

GC2-113 (Rev. 11/01)

WASHINGTON STATE GAMBLING COMMISSION
FUND-RAISING EVENT

FILL RECEIPT **NO 9543**

Date: 7/29/XX Time: 9:50 PM

\$ 80.00 To Table No.: 1

Prepare in duplicate: Received by (INITIALS):

Leave **ORIGINAL** with Cashier. Runner: L.L.

Place **COPY** in lock box at table. Dealer: _____

GC2-113 (Rev. 11/01)

WASHINGTON STATE GAMBLING COMMISSION
FUND-RAISING EVENT

FILL RECEIPT **NO 9543**

Date: 7/29/XX Time: 9:50 PM

\$ 80.00 To Table No.: 1

Prepare in duplicate: Received by (INITIALS):

Leave **ORIGINAL** with Cashier. Runner: L.L.

Place **COPY** in lock box at table. Dealer: Y.B.

GC2-113 (Rev. 11/01)

WASHINGTON STATE GAMBLING COMMISSION
FUND-RAISING EVENT

COUNT SLIP

Received from Table No.: 1

Date: 7/29/XX Time: 6:05 PM

Currency	No.	Amount
\$ 100.00's		
50.00's		
20.00's	<u>3</u>	<u>60.00</u>
10.00's	<u>4</u>	<u>40.00</u>
5.00's	<u>2</u>	<u>10.00</u>
2.00's		
1.00's		

Coin	No.	Amount
\$ 1.00's		
.50's		
.25's		
.10's		
.05's		
.01's		

Chips	No.	Amount
\$ 10.00's		
5.00's		
1.00's		
.50's		
TOTAL		<u>\$ 110.00</u>

Verified by (Initials) B.B. S.P.

WASHINGTON STATE GAMBLING COMMISSION
FUND-RAISING EVENT

COUNT SLIP

Received from Table No.: 1

Date: 7/29/XX Time: 8:20 PM

Currency	No.	Amount
\$ 100.00's		
50.00's		
20.00's	<u>4</u>	<u>80.00</u>
10.00's	<u>7</u>	<u>70.00</u>
5.00's	<u>11</u>	<u>55.00</u>
2.00's		
1.00's	<u>10</u>	<u>10.00</u>

Coin	No.	Amount
\$ 1.00's		
.50's		
.25's		
.10's		
.05's		
.01's		

Chips	No.	Amount
\$ 10.00's		
5.00's		
1.00's		
.50's		
TOTAL		<u>\$ 215.00</u>

Verified by (Initials) B.B. S.P.

WASHINGTON STATE GAMBLING COMMISSION
FUND-RAISING EVENT

COUNT SLIP

Received from Table No.: 1

Date: 7/29/XX Time: 10:40 PM

Currency	No.	Amount
\$ 100.00's		
50.00's		
20.00's		
10.00's	<u>6</u>	<u>60.00</u>
5.00's	<u>21</u>	<u>105.00</u>
2.00's	<u>2</u>	<u>4.00</u>
1.00's	<u>14</u>	<u>14.00</u>

Coin	No.	Amount
\$ 1.00's		
.50's		
.25's		
.10's		
.05's		
.01's		

Chips	No.	Amount
\$ 10.00's		
5.00's		
1.00's		
.50's		
TOTAL		<u>\$ 183.00</u>

Verified by (Initials) B.B. S.P.

WASHINGTON STATE GAMBLING COMMISSION
FUND-RAISING EVENT

COUNT SLIP

Received from Table No.: 1

Date: 7/29/XX Time: 11:50 PM

Currency	No.	Amount
\$ 100.00's		
50.00's		
20.00's		
10.00's	<u>1</u>	<u>10.00</u>
5.00's	<u>2</u>	<u>10.00</u>
2.00's		
1.00's	<u>8</u>	<u>8.00</u>

Coin	No.	Amount
\$ 1.00's	<u>44</u>	<u>44.00</u>
.50's	<u>6</u>	<u>3.00</u>
.25's		
.10's		
.05's		
.01's		

Chips	No.	Amount
\$ 10.00's		
5.00's	<u>22</u>	<u>110.00</u>
1.00's	<u>53</u>	<u>53.00</u>
.50's		
TOTAL		<u>\$ 173.00</u>

Verified by (Initials) B.B. S.P.

WASHINGTON STATE GAMBLING COMMISSION

**FUND RAISING EVENT
GAME REVENUE SUMMARY**

LICENSEE NAME: _____ DATE: _____

GAMING TABLE	NAME OF GAME	TOTAL CASH AND CHIPS RETURNED FROM GAME (--)	TOTAL FILLS TO GAME (=)	NET RECEIPTS (LOSS)
1		\$	\$	\$
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
	TOTAL ALL GAMES	\$	\$	\$
		GROSS RECEIPTS	PRIZES PAID	
	BINGO, RAFFLES, LOTTERIES, AND DRAWINGS	\$	\$	\$
	PULL TABS			
	DRAWING FOR EXCESS OF \$10,000			
	TOTAL ALL ACTIVITIES			\$

WASHINGTON STATE GAMBLING COMMISSION

**FUND RAISING EVENT
GAME REVENUE SUMMARY**

LICENSEE NAME: Ye Olde Fraternal Organization DATE: 7/29/XX

GAMING TABLE	NAME OF GAME	TOTAL CASH AND CHIPS RETURNED FROM GAME (--)	TOTAL FILLS TO GAME (=)	NET RECEIPTS (LOSS)
1	<i>Blackjack</i>	\$ 746.00	\$ 600.00	\$ 146.00
2	<i>Blackjack</i>	833.00	500.00	333.00
3	<i>Blackjack</i>	520.00	530.00	<10.00>
4	<i>Blackjack</i>	798.00	600.00	198.00
5	<i>Chuck-A-Luck</i>	214.00	130.00	84.00
6	<i>Beat the Dealer</i>	600.00	400.00	200.00
7	<i>4-5-6</i>	570.00	470.00	100.00
8	<i>Sweet 16</i>	150.00	50.00	100.00
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
TOTAL ALL GAMES		\$ 4431.00	\$ 3280.00	\$ 1151.00
		GROSS RECEIPTS	PRIZES PAID	
BINGO, RAFFLES, LOTTERIES, AND DRAWINGS		\$	\$	\$ 85.00
PULL TABS				54.00
DRAWING FOR EXCESS OF \$10,000				
TOTAL ALL ACTIVITIES				\$ 1290.00

WASHINGTON STATE GAMBLING COMMISSION
FUND RAISING EVENT
COUNT AND RECONCILIATION OF CASH AND CHIPS

LICENSEE NAME: _____ DATE: _____

COUNT OF CASH AND CHIPS

CURRENCY	BEGINNING CASH		ENDING CASH	
	HOW MANY	AMOUNT	HOW MANY	AMOUNT
\$ 100.00's	_____	\$ _____	_____	\$ _____
50.00's	_____	_____	_____	_____
20.00's	_____	_____	_____	_____
10.00's	_____	_____	_____	_____
5.00's	_____	_____	_____	_____
2.00's	_____	_____	_____	_____
1.00's	_____	_____	_____	_____
COIN				
\$ 1.00's	_____	_____	_____	_____
.50's	_____	_____	_____	_____
OTHER COINS	_____	_____	_____	_____
CHECKS (ATTACH LIST)	_____	_____	_____	_____
TOTAL		\$ _____ (1)		\$ _____ (3)

DENOMINATION	BEGINNING CHIPS		ENDING CHIPS	
	HOW MANY	AMOUNT	HOW MANY	AMOUNT
\$ 10.00's	_____	\$ _____	_____	\$ _____
5.00's	_____	_____	_____	_____
1.00's	_____	_____	_____	_____
.50's	_____	_____	_____	_____
TOTAL		\$ _____ (2)		\$ _____ (4)

VERIFICATION SIGNATURES	BEGINNING BANKROLL	ENDING BANKROLL
_____	_____	_____
_____	_____	_____

CASH AND CHIP RECONCILIATION

	CASH	(+)	CHIPS	(=)	TOTAL
ACTUAL ENDING BANKROLL PER COUNT	\$ _____	(3)	\$ _____	(4)	\$ _____
LESS BEGINNING BANKROLL		(1)		(2)	_____
NET RECEIPTS (LOSS) PER ACTUAL COUNT	\$ _____		\$ _____		_____
NET RECEIPTS (LOSS) PER RECORDS					_____
OVER / (SHORT)					\$ _____

WASHINGTON STATE GAMBLING COMMISSION
FUND RAISING EVENT
COUNT AND RECONCILIATION OF CASH AND CHIPS

LICENSEE NAME: Ye Olde Fraternal Organization DATE: 7/29/XX

COUNT OF CASH AND CHIPS

CURRENCY	BEGINNING CASH		ENDING CASH	
	HOW MANY	AMOUNT	HOW MANY	AMOUNT
\$ 100.00's		\$	1	\$ 100.00
50.00's			3	150.00
20.00's			72	1440.00
10.00's			78	780.00
5.00's			88	440.00
2.00's			4	8.00
1.00's			299	299.00
COIN				
\$ 1.00's	3000	3000.00	1675	1675.00
.50's	4000	2000.00	2785	1392.50
OTHER COINS				7.50
CHECKS (ATTACH LIST)		2000.00		
TOTAL		\$ 5000.00 (1)		\$ 6292.00 (3)

DENOMINATION	BEGINNING CHIPS		ENDING CHIPS	
	HOW MANY	AMOUNT	HOW MANY	AMOUNT
\$ 10.00's	100	\$ 1000.00	100	\$ 1000.00
5.00's	500	2500.00	500	2500.00
1.00's	5000	5000.00	5000	5000.00
.50's	3000	1500.00	3000	1500.00
TOTAL		\$ 10000.00 (2)		\$ 10000.00 (4)

VERIFICATION SIGNATURES **BEGINNING BANKROLL**

Aces R. High

Count M. Up

ENDING BANKROLL

Count M. Up

Med Cheese

Scavage McHordes

CASH AND CHIP RECONCILIATION

	CASH	(+)	CHIPS	(=)	TOTAL
ACTUAL ENDING BANKROLL PER COUNT	\$ 6292.00	(3)	\$ 10000.00	(4)	\$ 16292.00
LESS BEGINNING BANKROLL	5000.00	(1)	10000.00	(2)	15000.00
NET RECEIPTS (LOSS) PER ACTUAL COUNT	\$ 1292.00		Ø		1292.00
NET RECEIPTS (LOSS) PER RECORDS					1290.00
OVER / (SHORT)					\$ 2.00

WASHINGTON STATE GAMBLING COMMISSION

FUND-RAISING EVENT
RECORD OF DISTRIBUTION OF NET RECEIPTS IN EXCESS OF \$10,000

Licensee Name: _____ Date: _____

	NAME AND ADDRESS	AMOUNT
1		\$
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
	TOTAL DISTRIBUTION	\$

This form must be completed and retained as part of the records of your Fund-Raising Event if you have to distribute to the participants of your event any net receipts in excess of the \$10,000 limitation as defined by WAC 230-09-010.

**FUND-RAISING EVENT
PULL-TAB INCOME SUMMARY
INSTRUCTIONS**

PLEASE READ THE FOLLOWING INSTRUCTIONS CAREFULLY:



NOTE: Each pull-tab series shall constitute a separate table and have a separate number. Each series shall have a separate corresponding lock box, money paddle, chip rack for making change and payment of prizes. All currency, coin or chips used to purchase pull-tabs shall immediately be placed in the corresponding lock box by the attendant(s) on duty. All change given back to players shall be in the form of chips or coin.

NOTE: Up to a maximum of three pull-tab series may be out for play at one time. All pull-tabs must be sold from a booth or similar confined area which prohibits public access. Pull-tabs shall only be sold out of the original shipping container or a non-coin operated dispensing device (clear container). All pull-tab series for use at fund-raising events shall contain the Washington State inspection identification stamps and shall be purchased for specific use at fund-raising events and delivered to the licensee no earlier than 24 hours before the commencement of the event.

The numbered instructions below correspond to the numbers above or adjacent to the items printed on the face of this form. If you require assistance or have questions, please contact the special agent assigned to your area or the financial reporting section at (360) 486-3440.

- (1) **SIZE OF GAME:** The total number of pull-tabs available from the series prior to being placed in play. You should find this amount recorded on the flare for the pull-tabs.
- (2) **NUMBER NOT SOLD:** The total number of pull-tabs that remain unplayed when the series is removed from play. **NOTE:** This amount can only be determined by actual count.
- (3) **NUMBER PLAYED:** The "Size of Game" less "Number Not Sold". For Gambling Commission account purposes, "Number Played" means all chances that are removed or missing from the series. These chances are assumed to be played whether they were sold, lost, stolen, or otherwise unaccounted for.
- (4) **COST PER PLAY:** The price to play a single chance from the pull-tab series. **NOTE:** The price must be posted on the flare and shall be equal to the price set by the manufacturer.
- (5) **GROSS GAMBLING RECEIPTS:** the "Number Played" multiplied by the "Cost Per Play" (see WAC 230-14-280 for definition of gross gambling receipts).
- (6) **PRIZES PAID:** The value of all chips and coins awarded as prizes for a particular set. Winning pull-tabs shall be paid in chips and coin only. **Provided:** Winning pull-tabs may be redeemed for additional tabs from the same series only. When a winning pull-tab of more than twenty dollars (\$20) is cashed, the attendant shall immediately delete that prize from the corresponding flare with a black marker. In addition, the attendant(s) shall record the name and date of birth of the winner for prizes paid in excess of twenty dollars (\$20). All winning pull-tabs shall be defaced when cashed in and deposited in the corresponding lock box.
- (7) **NET GAMBLING RECEIPTS:** "Gross Gambling Receipts" less "Prizes Paid".
- (8) **ACTUAL CASH COUNT:** The actual currency, coin or chips on hand, per count, when each individual set is removed from play. When a series is removed from play, the series (including the flare), the corresponding lock box, and chip rack shall be transported to the count room by a runner; at which time the box shall be opened for tabulation. After completing the count, winning pull-tabs shall be packaged separately or banded and placed with the unused portion of the particular series in the original shipping container. The organization must retain the used series for a period of one year. This amount should reasonably agree with the "Net Gambling Receipts".
- (9) **OVER OR (SHORT):** The difference between "Net Gambling Receipts" and "Actual Cash Count". This difference could be due to miscounts, stolen or lost tabs, or inadvertent mixing of the cash between different sets. Substantial amounts (either over or short) recorded in this column are an indication of problems with accounting controls and should be investigated.
- (10) **TOTALS:** Each column with a total must be summed and these totals should then be combined with the totals from other pages. **NOTE:** At the completion of the fund-raising event, all series still out for play shall be transported to the count room by a runner for tabulation. All unopened pull-tab series shall be returned to the licensed distributor who furnished the series for a full refund. Pull-tabs may not be sold or transferred to another licensee.

**WASHINGTON STATE GAMBLING COMMISSION
FUND-RAISING EVENT
Pull-Tab Income Summary**

LICENSEE NAME:		EVENT DATE:							PAGE	OF		
WASHINGTON STATE I.D. STAMP NUMBER/LABEL	NAME OF GAME	STATION (TABLE) NUMBER	COMPUTATION OF GROSS GAMBLING RECEIPTS					PRIZES PAID	CASH RECONCILED			
			(1) SIZE OF GAME (-)	(2) NUMBER NOT SOLD (=)	(3) NUMBER PLAYED (X)	(4) COST PER PLAY (=)	(5) GROSS GAMBLING RECEIPTS (-)	(6) CHIPS / COIN ONLY (=)	(7) NET GAMBLING RECEIPTS (+)	(8) ACTUAL CASH COUNT (=)	(9) CASH OVER OR (SHORT)	
 10133823	<i>Nevada Club</i>	9	1600	1100	500	0.50	250.00	210.00	40.00	37.00	<3.00>	
 10133824	<i>Super X</i>	10	1600	1272	3258	0.50	164.00	150.00	14.00	15.00	1.00	
SAMPLE												
TOTALS (10)								414.00	360.00	54.00	52.00	<3.00>

NOTE: Instructions are on the back of this form.

SCHEDULE OF WINNERS

LICENSEE: _____ DATE OF EVENT: _____

LIST ANY MERCHANDISE PRIZES VALUED AT OVER \$50:

➤ Item: _____ Value: \$ _____ Was the prize donated or purchased?
(circle one)

Name: _____ Phone: (_____) _____ - _____

Address: _____

City: _____ State: _____ Zip _____

➤ Item: _____ Value: \$ _____ Was the prize donated or purchased?
(circle one)

Name: _____ Phone: (_____) _____ - _____

Address: _____

City: _____ State: _____ Zip _____

➤ Item: _____ Value: \$ _____ Was the prize donated or purchased?
(circle one)

Name: _____ Phone: (_____) _____ - _____

Address: _____

City: _____ State: _____ Zip _____

➤ Item: _____ Value: \$ _____ Was the prize donated or purchased?
(circle one)

Name: _____ Phone: (_____) _____ - _____

Address: _____

City: _____ State: _____ Zip _____

➤ Item: _____ Value: \$ _____ Was the prize donated or purchased?
(circle one)

Name: _____ Phone: (_____) _____ - _____

Address: _____

City: _____ State: _____ Zip _____

➤ Item: _____ Value: \$ _____ Was the prize donated or purchased?
(circle one)

Name: _____ Phone: (_____) _____ - _____

Address: _____

City: _____ State: _____ Zip _____

Preparer: _____ Date: _____

**Washington State Gambling Commission
Fund-Raising Event
Poker Tournament Winners Prize
Record**

Licensee: _____ Date: _____

Record all poker tournament prizes. (Include check # if paid by check)

Name, Address & Phone # of Winner	Description of Prize	Cost of Prize (Donated items= \$0)
_____ _____ _____ _____	_____ _____ _____ _____	\$ _____
_____ _____ _____ _____	_____ _____ _____ _____	\$ _____
_____ _____ _____ _____	_____ _____ _____ _____	\$ _____
_____ _____ _____ _____	_____ _____ _____ _____	\$ _____
_____ _____ _____ _____	_____ _____ _____ _____	\$ _____
_____ _____ _____ _____	_____ _____ _____ _____	\$ _____
_____ _____ _____ _____	_____ _____ _____ _____	\$ _____

Purchase Price of Prizes Awarded \$ _____(1)

(1) Place this number on the **Poker Tournament Summary** (GC2-182) – *Cost of Prizes Awarded Summary*.

**Washington State Gambling Commission
Fund-Raising Event
Poker Tournament Players Chip/Entry Fee Purchase Record**

Organization Name: _____ Tournament Date: _____

	Name of Player	Initial Chip/Entry Fee Purchase	Additional Chip Purchases					Total Purchase
			1	2	3	4	5	
1		\$	\$	\$	\$	\$	\$	\$
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
Totals		\$	\$	\$	\$	\$	\$	\$ (1)

(1) Place this number on the **Poker Tournament Summary** (GC2-182) – *Chip / Entry Fee Purchase Summary*.

**Washington State Gambling Commission
Fund-Raising Event
Poker Tournament Summary**

Organization: _____ **Tournament Date:** _____

This form must be attached to the Poker Tournament Players form and Winners Record.

Summary of Chip/Entry Fee Purchases and Prizes

This should be the total from each page of the: Poker Tournament Players Chip/Entry Fee Purchase Record

Page	Chip/Entry Fee Purchase Summary	Cost of Prizes Awarded Summary
1	\$	\$
2	\$	\$
3	\$	\$
4	\$	\$
5	\$	\$
6	\$	\$
7	\$	\$
8	\$	\$
9	\$	\$
10	\$	\$
Total	\$	\$

****Note**** List additional pages on back of this sheet if necessary

BANK DEPOSIT – Deposit the money you made from the Poker Tournament into the bank.

- + Beginning Bank (if you had one) _____
- + Chip & Entry Fee Purchases _____
- Cash Prizes Awarded _____

Bank Deposit Should Be _____

Attach validated bank deposit slip and write explanation if the amount deposited is not the same as what it should be.

Reviewer and Prepare of this report sign below.

Preparer _____ Date _____

Reviewer _____ Date _____