Print Form

Reset Form

# MISSOURI GAMING COMMISSION

**CHARITABLE GAMES DIVISION**
**PO BOX 1847**
**JEFFERSON CITY MO 65102**

## QUARTERLY REPORT INFORMATION

**Do not use this form if you wish to submit your quarterly report electronically.** The Missouri Gaming Commission has introduced a new electronic quarterly reporting system. If you wish to submit electronically, please use the following link: http://www.mgc.dps.mo.gov/BingoOrganizationWeb/Loginpage.aspx and contact the Missouri Gaming Commission, Charitable Games Division at (866) 801-8643 with questions regarding use of this system.

The following report will **only** allow you to enter your information for submission to the Missouri Gaming Commission via **mail or fax**. You will not be able to save your completed quarterly report using this form. After you have completed the quarterly report, you will need to print two copies (one for submission and one for your records) using the print button located at the top of the document.

To begin, click on the "Name of Organization" field on the first page of the occasion report. After you have entered your organization's name, press the Tab key to proceed to the next field. The report is set up to advance to the next field after you have entered the information and press the Tab key. If you press the Enter key, the information will be entered in that field, but you will not advance to the next field.

After you have completed the quarterly report, you should print the report and mail or fax it to:

Missouri Gaming Commission
Charitable Games Division
PO Box 1847
Jefferson City MO 65102-1847
Fax: (573) 526-5374

MISSOURI GAMING COMMISSION
CHARITABLE GAMES DIVISION
PO BOX 1847
JEFFERSON CITY MO 65102

# QUARTERLY REPORT

TELEPHONE: (573) 526-5370 FAX: (573) 526-5374
IN-STATE TOLL FREE:
(866) 801-8643

| OFFICE USE ONLY | | |
|---|---|---|
| POSTMARK | COLUMN (D) | COLUMN (F) |
| CHECK NO. | PENALTY | COLUMN (G) |

| NAME OF LICENSEE | BINGO LICENSE NUMBER |
|---|---|
| ADDRESS / CITY / STATE / ZIP CODE | DAY(S) PLAYED EACH WEEK |

| (1) MM/YY | (2) NO. OF GAMES | GROSS RECEIPTS (3) PULL-TABS | (4) BINGO CARDS | (5) MISC. | (6) STARTING CASH | PRIZES AWARDED CASH/MERCHANDISE (7) PULL-TABS | (8) BINGO CARDS | (9) NET RECEIPTS | (10) AMOUNT DEPOSITED | (11) IF NET RECEIPTS AND AMOUNT DEPOSITED ARE DIFFERENT, PLEASE EXPLAIN. |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | $0.00 | | |
| | | | | | | | | $0.00 | | |
| | | | | | | | | $0.00 | | |
| **TOTAL** | 0 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 | |

**BINGO OCCASION** Enter number of players and deposits during the quarter for each occasion.

| DATE | NO. OF PLAYERS | AMOUNT DEPOSITED | DATE | NO. OF PLAYERS | AMOUNT DEPOSITED | DATE | NO. OF PLAYERS | AMOUNT DEPOSITED |
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**THIS REPORT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF**

| PREPARER SIGNATURE | DAYTIME TELEPHONE NUMBER ( ) | DATE |
|---|---|---|

## INSTRUCTIONS

This report is required by Section 313.045, RSMo and Regulation 11 CSR 45-30.210. It must be filed by every regular bingo licensee and any organization who applies for and receives more than three special bingo licenses throughout the year. The Quarterly Reports are due as follows: First Quarter (January through March) due April 30; Second Quarter (April through June) due July 31; Third Quarter (July through September) due October 31; Fourth Quarter (October through December) due February 28. Required information must be entered on each line. If no bingo occasions were held during any calendar month, enter “None” on that line. The report should be signed by the preparer.

## BINGO DISBURSEMENTS

| A | B | C | D | E | F | G |
|---|---|---|---|---|---|---|
| DATE | CHECK NUMBER | PAYEE NAME | EXPENSES OF CONDUCTING GAME | PURPOSE FOR EXPENDED PROCEEDS | ORGANIZATION DONATIONS | CHARITY EXPENDITURES |
| | | | $ | | $ | $ |
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| **TOTALS** | | | $ 0.00 | | $ 0.00 | $ 0.00 |

Every disbursement made from the bingo checking account must be listed in detail on the page. Disbursements made in payment of expenses in conducting the game of bingo are to be entered in Column D. Disbursements from the "Net" proceeds payable to your own organization are to be entered in Column F. Disbursements from the "Net" proceeds payable to a charitable organization, other than your own, are to be entered in Column G. Provide a brief explanation of the lawful religious, charitable or philanthropic purpose in Column E.



ATTACH ADDITIONAL SHEETS IF NECESSARY

## BINGO DISBURSEMENTS

| A | B | C | D | E | F | G |
|---|---|---|---|---|---|---|
| DATE | CHECK NUMBER | PAYEE NAME | EXPENSES OF CONDUCTING GAME | PURPOSE FOR EXPENDED PROCEEDS | ORGANIZATION DONATIONS | CHARITY EXPENDITURES |
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| **TOTALS** | | | $ 0.00 | | $ 0.00 | $ 0.00 |

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| **TOTALS** | | | $ 0.00 | | $ 0.00 | $ 0.00 |

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TELEPHONE (573) 526-5370/IN-STATE TOLL FREE (866) 801-8643

# PROGRESSIVE GAME ACTIVITY REPORT

**SCHEDULE 1**
(REV. 9-06)

| NAME OF ORGANIZATION | | | | BINGO LICENSE NUMBER |
|---|---|---|---|---|
| DATE OF OCCASION | PROGRESSIVE PRIZE OFFERED | CONSOLATION PRIZE OFFERED | NUMBER OF BALLS NEEDED TO WIN PROGRESSIVE PRIZE | ACTUAL PRIZE AMOUNT AWARDED |
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# PROGRESSIVE GAME ACTIVITY REPORT

**SCHEDULE 1**
(REV. 9-06)

| NAME OF ORGANIZATION | BINGO LICENSE NUMBER |
|---|---|
| | |

| DATE OF OCCASION | PROGRESSIVE PRIZE OFFERED | CONSOLATION PRIZE OFFERED | NUMBER OF BALLS NEEDED TO WIN PROGRESSIVE PRIZE | ACTUAL PRIZE AMOUNT AWARDED |
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