



**Manitoba Gaming
Control Commission**

Questions? Contact us:
By Telephone: 954-9400 Toll Free: 1-800-782-0363
By Fax: 954-9450 Toll Free: 1866-999-6688
Or visit our website: www.mgcc.mb.ca

COMMUNITY RAFFLE RECORD

ORGANIZATION NAME: _____ RAFFLE CHAIRPERSON: _____

LICENCE NUMBER: _____ RAFFLE DRAW DATE: _____

TOTAL NUMBER OF TICKETS PRINTED: _____

TOTAL NUMBER OF TICKETS SOLD: _____

X TICKET PRICE: \$ _____

TOTAL GROSS REVENUE (TICKET SALES): \$ _____

List of Expenses	Amount
Printing	\$ _____
Cost of Prizes	\$ _____
Advertising	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

TOTAL EXPENSES: \$ _____

NET PROFIT: \$ _____

What did you do with the profit?:
(ATTACH RECEIPTS)

AMOUNT	PAID TO	ADDRESS
\$ _____	_____	_____
\$ _____	_____	_____
\$ _____	_____	_____

PRIZE/WINNERS LIST:

PRIZE	TICKET NUMBER	WINNER'S NAME
_____	_____	_____
_____	_____	_____
_____	_____	_____

(Attach a separate sheet to list more prizes/winners)

Print name of person completing this report: _____

SIGNATURE: _____ Telephone Number: _____

**Attach a ticket sample and the winning ticket stubs to this record.
This raffle record must be kept for at least three years. Do not send to MGCC unless we ask for it.**