

LOTTERY YEAR END REPORT

Occasionally, additional information may be requested by the Licensing & By-law Enforcement Department. For further assistance contact 519 736-0012 ext. 2219 or email licensing@amherstburg.ca

Name of Organization:						
Mailing Ad	Mailing Address of Organization:					
Name and phone number of Coordinator:						
1. Reportin	Reporting Period for which this report is made. This report must be completed once per year.					
Fiscal Yea	iscal Year End(<u>DUE WITHIN 6 MONTHS OF YEAR END)</u>					
2. Cheques	heques written from lottery trust account during reporting period. Attach additional page if necessary.					
Cheque Date	Cheque No.	PAYEE	PURPOSE	AMOUNT		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				Φ.		

Name of Bank	Branch - Addre	ss Account No.
Summary of lottery revenues and expe	nditures.	
ctual Bank Statement Balance at start o	\$	
Gross raffle proceeds deposited into lotte	\$	
Credit interest in Lottery Trust Account fo	\$	
Gross raffle proceeds spent from the Lott	\$	
Actual Bank Statement Balance at end Fi	\$	
	Certificate	
This Report was prepared by	, Phone	
Signed and Certified Correct this _	day of,	
We, the undersigned, as two Principal Of statement of the Lottery funds referred to	ficers of the above organization ce herein.	rtify that the above report is a correct
Principal Officer		Principal Officer
	Signature	
	Print Name in Full	
	Title	
	Individuals Contact Telephone	

PLEASE ATTACH A COPY OF YOUR OPENING BANK STATEMENT AND YEAR END BANK STATEMENT WITH THIS REPORT. REPORTS NOT CONTAINING THIS INFORMATION SHALL BE CONSIDERED INCOMPLETE.

Number

Date of Signing