

# VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES OFFICE OF CHARITABLE AND REGULATORY PROGRAMS

P.O. Box 526, Richmond, VA 23218 (804) 786-1343, Option 2 www.vdacs.virginia.gov

## CHARITABLE GAMING PERMIT AMENDMENT

#### **General Instructions**

Change requests shall be in writing and submitted to OCRP with at least 30 days in advance of the proposed effective date of the requested change.

Organizations must plan accordingly as last minute changes may not be processed in time of the effective date of the requested change.

Organizations cannot conduct, or use an operator to administer, any charitable gaming activity without the permit clearly authorizing them to conduct such activity.

- A. Use this form to notify the Office of Charitable and Regulatory Programs of a change request to an active and unexpired charitable gaming permit.
- B. Complete the entire application and all required attachments, including documents and/or explanation sheets.
- C. Place "N/A" if item is not applicable. Please type or print all answers. Do not use pencil.
- D. If necessary, attach additional documents or explanation sheets in support of a change request such as a revised lease agreement.
- E. Ensure this form includes the area code in each instance where a telephone number is requested and it is signed/dated by the appropriate individual(s).
- F. If applicable, enclose a non-refundable \$200 permit amendment fee for any social organization seeking authorization to operate and conduct electronic pull-tab/electronic gaming payable to: Treasurer of Virginia.
- Mail the completed application, applicable fee, and all required attachments to the following address: VDACS, Office of Charitable and Regulatory Programs, P.O. Box 526, Richmond, Virginia 23218.
- H. Allow sufficient amount of time for processing a **COMPLETED** form with at least 30 days in advance of the proposed effective date of the requested change.

	Incomplete form and not providing required attachments will delay the processing and it may be returned to the organization for completion.				
		ORGANIZATION	INFORMATION		
1.	Organization's Name:			OCRP#	
2.	Mailing Address:				
	City:	State:	Zip Code:	Telephone:	
3.	Principal Address (as registered w/ the State Corporation Commission):			·	
	City:	State:	Zip Code:		
	Political Subdivision (City, County		· ———		
		CHARITABLE GA	MING ACTIVITIE	:S	
4.	List the location(s), day(s), date(s needed or your organization utilizes additional Building Name (If applicable):		ation relative to the additional	facility on a separate pag	
	Physical Address:				
				ode:	
	Political Subdivision (City, County				
		Bingo	Paper I	nstant Bingo, Seal C Tabs (Social Quar	
	Type of Charitable Gaming Activity:	Standalone Raffle	Electro	nic Pull-Tab/Electro Device (Social Qua	O .
	(Mark an "X" by the appropriate box)	Annual Fundraising Event (Paper Instant Bingo, Seal Cards & Pull-Tabs)	Electro	nic Pull-Tab/Electro Device (Public Spa	O .
			Texa	s Hold'em Poker To	urnament
	Day(s) of the Week and/or Freque	ency of Gaming Activities:			
		am/pm		ose:	_
	("Doors open" cannot be more than two h requirement only ap			e more than two hours at uirement only applies to l	fter "end game time." This bingo)
	Begin Game Time:	am/pm	End Game Ti		am/pm
	(The start times of two Texas Hold'em po allowed at the premises in a 24-hour po	eriod. If two Texas Hold'em poker tourr			
5.	5. Has the organization adopted any "house rules" for the charitable gaming activity identified in question 4, it wishes to conduct?  (Texas Hold'em poker tournaments require house rules, which shall be submitted as part of this application, preapproved by the Department and comply with 11VAC20-20-30 (F) of the Charitable Gaming Regulations.)  If "yes," please attach a copy of the house rules. Yes / No				

		CHARITA	ABLE GAMING ACT	IVITIES			
6.		e organization wishing to amend its permit in opplease go to question 7 of this form.	order to conduct a bingo sess	ion? If "no,"		Yes / No	
	FOR	BINGO ONLY					
	a.	If "yes" is selected under question 6, then do lease the facility; or (ii) own and have title to session is to be conducted?	• ,,	(Select (	One):	□ Leased Fa □ Owned Fa	
		Is the facility located within the (i) coorganization's principal office, as recommission; or (ii) an adjoining cooprincipal office?	gistered with the State Corpo	ration		Yes / No	
		Is the organization (i) an association of war veterans or auxiliary units thereof organized in the United States; (ii) a fraternal association or corporation operating under the lodge system; and (iii) an accredited public institution of higher education or other postsecondary school licensed or certified by the Board of Education or the State Council of Higher Education for Virginia qualified under § 501(c)(3) of the Internal Revenue Code?					
						Yes / No	
		Does the <u>establishment</u> have an A Chapter 2 (§ 4.1-200 et seq.) of Title	•			Yes / No	
organization wishing to conc pursuant to Chapter 2 (§ 4.1			particular question, then does of bingo hold such ABC licens 00 et seq.) of Title 4.1 of the	e granted			
		Virginia?				Yes / No	
		If "yes" is selected under this p copy of the ABC license grante 2 (§ 4.1-200 et seq.) of Title 4.	ed to the organization pursuar		Copy attached?	Yes / No	
	Is the facility used by more than one organization for the purpose of conducting charitable gaming activities? If "yes," is selected under this question, then please provide the name of each organization utilizing this facility on a separate page.					Yes / No	
		If "leased facility" is selected under copy of the current lease for the fac			Lease		
		conducted by the organization.			attached?	Yes / No	
		If "leased facility" is selected under	this particular question, then	please provide	the following	information:	
		Landlord's Corporate Name:					
		Landlord's Name:	E' AN	14' 1 H 1		1 (1)	
		Physical Address:	First Name	Middle Name		Last Name	
		City:	State:	Zip Code:			
		Telephone:	otato.		Fax Number:	_	
		If "leased facility" is selected under	this particular question, then				
		Facility's Name:	ano paraodiai quodion, mon	piodoo piovido	uio ionownig	, iiiioiiiiaiioiii.	
		Facility Manager's Name:					
		r domy Manager 3 Name.	First Name	Middle Name		Last Name	
		Telephone:		I	Fax Number:		
	b.	If "yes" is selected under question 6, then is conduct the bingo session contracted or own	• •	(Select One	or Both):	□ Contracted I □ Owned Eq	
		Other (Explain):					
		If "contracted equipment" is selecte attach a copy of the current agreem		on, then	Agreement attached?	Yes / No	

		CHARITABLE GAMING ACTIVITIES			
	C.	If "yes" is selected under question 6, then list the name of all manufacturers and/or su supplies to your organization, or who the organization anticipates obtaining them from Supplier's Name:  Supplier's Name:  Supplier's Name:	:	e sold charita	able gaming
7	le the	e organization wishing to amend its permit in order to conduct a raffle event outside of a	1		
٠.	bingo	o session? If "no," then please go to question 8 of this form.	L	Yes / No	
	FC	OR STANDALONE RAFFLE ONLY, INCLUDING 50/50, QUEEN OF HEARTS, KING O	F CLUBS & DU	JCK RACES	
	a.	If "yes" is selected under question 7, then will the raffle event be held in conjunction with a casino or Las Vegas night?		Yes / No	
	b.	If "yes" is selected under question 7, then what date does the organization plan to			
		begin raffle ticket sales? (Tickets cannot be sold until receipt of a valid amended charitable gaming permit.)	M	onth/Day/Year	
		Date and time of the raffle drawing:			
			Month/Da	ay/Year	Time
	C.	If "yes" is selected under question 7, then what is the raffle prize to be given away? (L	ose separate page	e, ii Hecessary.	)
	d. e.	If "yes" is selected under question 7, then was the tangible prize(s) purchased and/or value of each prize? (Use additional page, if necessary.)  Describe Tangible Prize:  (Select One)			muno.
	f.	If "yes" is selected under question 7, then will volunteers/members who sell the raffle tickets be allowed to buy raffle tickets?  If "yes," is selected under this particular question, then please provide specific information on a separate page on how the organization intends to maintain integrity of the raffle with this allowance.	Page attached?	Yes / No Yes / No	
	g.	If "yes" is selected under question 7, then please provide specific information on a separate page on the raffle activity, including who will be responsible for its oversight, and all rules of play (i.e. what happens if not enough tickets are sold or how many days a winner has to claim the prize.)	Page attached?	Yes / No	
	h.	If "yes" is selected under question 7, then will all of the raffle tickets be sold within the Commonwealth of Virginia?		Yes / No	
		If "no" is selected under this particular question, then is the organization compliant with all of the regulations of the jurisdictions where the raffle ticket will be sold?		Yes / No	
		If "no" is selected under this particular question, then please provide an explanation on a separate page on how the organization will sell tickets outside of the Commonwealth of Virginia.	Page attached?	Yes / No	

		CHARITABLE GAMING ACTIVIT	IES		
	i.	If "yes" is selected under question 7, then does the organization lease the facility or own and have title to the facility where the raffle drawing will occur?	(Select One):	<ul><li>□ Leased Facility</li><li>□ Owned Facility</li></ul>	
	Other (Explain):				
If "leased facility" is selected under this particular question, then please attach a copy of the current lease that authorizes the organization to use the facility in the conduct of the raffle drawing.  Lease attached? Yes / No					
		g information:			
Landlord's Corporate Name:					
		First Name Physical Address:	Middle Name	Last Name	
		-	ip Code:		
		Telephone:	Fax Number	<del>_</del> :	
		If "leased facility" is selected under this particular question, then please			
		Facility's Name:		g	
		Facility Manager's Name:			
		First Name	Middle Name	Last Name	
		Telephone:	Fax Number	:	
	j.	If "yes" is selected under question 7, then is the facility used by more than one organization for the purpose of conducting charitable gaming activities? If "yes selected under this question, then please provide the name of each organizatio utilizing this facility on a separate page.		Yes / No	
	k.	If "yes" is selected under question 7, then is the equipment used to conduct the raffle drawing contracted or owned by the organization?  Other (Explain):	(Select One or Both):	□ Contracted Equipment □ Owned Equipment	
		If "contracted equipment" is selected under this particular question, the attach a copy of the current agreement for the equipment.	en Agreement attached?	Yes / No	
	I.	If "yes" is selected under question 7, then the applicant must submit all pertiner information identified on page 11 of the form. Is the pertinent information attact this form?		Yes / No	
8.		e social organization wishing to sell electronic pull-tabs and paper instant bingo, s is and/or pull-tabs in its social quarter? If "no," then please go to question 9 of thi		Yes / No	
	FOR ELECTRONIC PULL-TAB/ELECTRONIC GAMING DEVICE AND PAPER INSTANT BINGO, SEAL CARDS AND/OR PULL-TABS BY A SOCIAL ORGANIZATION (SOCIAL QUARTER ONLY)				
	a.	If "yes" is selected under question 8, then is the facility in which electronic pull-t and paper instant bingo, seal cards and/or pull-tabs are sold open only to the so organization's members and their guests?		Yes / No	
		If "yes" is selected under this particular question, then please provide a of the organization's membership requirements and copy of rules, which governs a member's guest.		Yes / No	
	b.	If "yes" is selected under question 8, then is there controlled access to the facility where electronic pull-tabs and paper instant bingo, seal cards and/or pull-tabs a sold?	•	Yes / No	
		If "yes" is selected under this particular question, then please provide a explanation on a separate page on how the organization is controlling to the facility.		Yes / No	

	CHARIT	ABLE GAMING	<b>ACTIVITIES</b>		
C.	If "yes" is selected under question 8, then of (i) exclusively and entirely leased the facility the facility where the electronic pull-tabs and cards and/or pull-tabs are to be sold?	y; or (ii) own and have ti	tle to	ect One):	Exclusively & Entirely     Leased Facility     Owned Facility
	Is the facility located within the (i) organization's principal office, as re Commission; or (ii) an adjoining co organization's principal office?	egistered with the State	Corporation		Yes / No
	Is the organization (i) an association organized in the United States; (ii) operating under the lodge system; higher education or other postsect Board of Education or the State Conqualified under § 501(c)(3) of the I	a fraternal association of or (iii) an accredited purondary school licensed ouncil of Higher Education.	or corporation blic institution of or certified by the on for Virginia	of	Yes / No
	Does the <u>establishment</u> have an Chapter 2 (§ 4.1-200 et seq.) of Ti				Yes / No
	If "yes" is selected under this organization wishing to condupursuant to Chapter 2 (§ 4.1-	uct bingo hold such ABC	license granted		
	Virginia?				Yes / No
	If "yes" is selected under this copy of the ABC license gran Chapter 2 (§ 4.1-200 et seq.)	ted to the social organiz	ation pursuant to	Copy attached?	Yes / No
	Is the facility used by more than or conducting charitable gaming active question, then please provide the facility on a separate page.	vities? If "yes," is select	ed under this		Yes / No
	If "exclusively and entirely leased facility" is selected under this particular question, then attach a copy of the current lease for the facility where the electronic pull-tabs and paper instant bingo, seal cards and/or pull-tabs are sold by the social organization.			Lease attached?	Yes / No
	If "exclusively and entirely leased to information:	facility" is selected unde	r this particular qu	estion, then plea	ase provide the following
	Landlord's Corporate Name:				
	Landlord's Name:				
		First Name	Middle Nam	е	Last Name
	Physical Address:				
	City:	State:	Zip Code:		_
	Telephone:			Fax Number	·
	If "exclusively and entirely leased to question, then is there any other o				Yes / No
d.	If "yes" is selected under question 8, then li electronic pull-tabs and paper instant bingo anticipates obtaining them from:				
	Manufacturer's/Supplier's Name:				
	Manufacturer's/Supplier's Name:				
	Manufacturer's/Supplier's Name:				

		CHARITABLE GAMING ACTIVITIES		
	e.	If "yes" is selected under question 8, then is the social organization (i) intending to advertise or is advertising electronic pull-tabs/electronic gaming and paper instant bingo, seal cards and/or pull-tabs; and/or (ii) intending to solicit or is soliciting the public to play on an electronic pull-tabs/electronic gaming device or purchase paper instant bingo, seal cards and/or pull-tabs?		Yes / No
	f.	If "yes" is selected under question 8 <u>and</u> the social organization intends to operate and conduct electronic pull-tab/electronic gaming device, then how many actual electronic pull-tab/electronic gaming devices will be located within the social organization's social quarter?		
		As a reminder, pursuant to § 18.2-340.26:3 of the <i>Code of Virginia</i> , the maximum number of electronic pull-tab/electronic gaming devices at a location is 18. Furthermore, pursuant to 11VAC20-20-40 (L) of the Charitable Gaming Regulations, a social organization shall only use a device that bears a device tag affixed by the Department.		
	g.	If "yes" is selected under question 8 <u>and</u> the social organization intends to operate and conduct electronic pull-tab/electronic gaming device, then will the organization contract or own the device from a manufacturer?	e or Both):	□ Contract Equipment □ Owned Equipment
		Other (Explain):  If "contract equipment" is selected under this particular question, then attach a copy of the current agreement for the equipment.	Agreement attached?	Yes / No
	h.	If "yes" is selected under question 8 <u>and</u> the social organization intends to operate and conduct electronic pull-tab/electronic gaming device, then is the social organization's social quarter consist of a contiguous area within its primary location?		Yes / No
	i.	If "yes" is selected under question 8 <u>and</u> the social organization intends to operate and conduct electronic pull-tab/electronic gaming device, then is the social organization's primary location where the social quarter is located have a (i) unique physical address as established by the United State Postal Service <u>and</u> (ii) certificate of occupancy issued by the city, county, or town where the building is physically located?		Yes / No
	j.	If "yes" is selected under question 8 <u>and</u> the social organization intends to operate and conduct electronic pull-tab/electronic gaming device, then has the premises where the social organization intends to operate and conduct electronic pull-tabs/electronic gaming has been deemed a common nuisance pursuant to § 18.2-258 of the <i>Code of Virginia</i> ?		Yes / No
9.	the p	e organization wishing to operate and conduct electronic pull-tabs/electronic gaming in public space of a social organization? If "no," then please go to question 10 of this location.		Yes / No
		OR ELECTRONIC PULL-TAB/ELECTRONIC GAMING DEVICE BY AN ORGANIZATION DCIAL ORGANIZATION	N IN THE PU	BLIC SPACE OF A
	a.	If "yes" is selected under question 9, then is the organization leasing a public space where it intends to operate and conduct electronic pull-tab/electronic gaming device from either a (i) an association of war veterans or auxiliary units thereof organized in the United States; (ii) a fraternal association or corporation operating under the lodge system; or (iii) an accredited public institution of higher education or other postsecondary school licensed or certified by the Board of Education or the State Council of Higher Education for Virginia qualified under § 501(c)(3) of the Internal Revenue Code?  If "yes" is selected under this particular question, then attach a copy of the	If "no," explain on a separate page.	Yes / No
		current lease for the facility where the electronic pull-tab/electronic gaming device is to be operated and conducted by the organization.	Lease attached?	Yes / No

	CHARITABLE GAMING ACTIVITIES		
b.	If "yes" is selected under question 9, then is the facility used by more than one organization for the purpose of conducting charitable gaming activities? If "yes," is selected under this question, then please provide the name of each organization utilizing this facility on a separate page.		Yes / No
	Please provide the following information:		
	Landlord's Corporate Name:		
	Landlord's Name:		
	First Name Middle Nar Physical Address:	ne	Last Name
	City: State: Zip Code	:	
	Telephone:	Fax Number:	
	Is there any other organization leasing the same facility?		Yes / No
C.	If "yes" is selected under question 9, then list the name of all manufacturers and/or selectronic pull-tabs to your organization, or who the organization anticipates obtaining Manufacturer's/Supplier's Name:		re offered and/or sold
	Manufacturer's/Supplier's Name:		
	Manufacturer's/Supplier's Name:		
d.	If "yes" is selected under question 9, then will the organization contract	One or Both):	□ Contract Equipment □ Owned Equipment
	If "contract equipment" is selected under this particular question, then attac a copy of the current agreement for the equipment.	h Agreement attached?	Yes / No
e.	If "yes" is selected under question 9, then is the organization (i) intending to advertis or is advertising electronic pull-tabs/electronic gaming and/or (ii) intending to solicit or is soliciting the public to play on an electronic pull-tabs/electronic gaming device?		Yes / No
f.	If "yes" is selected under question 9, then how many electronic pull-tab/electronic gaming devices will be located within the public space for the organization to operate and conduct?	)	
	As a reminder, pursuant to § 18.2-340.26:3 of the <i>Code of Virginia</i> , the maximum number of electronic pull-tab/electronic gaming devices at a location is 18. Furthermore, pursuant to 11VAC20-20-60 (L) of the Charitable Gaming Regulations an organization shall only use a device that bears a device tag affixed by the Department.		
g.	If "yes" is selected under question 9, then is the public space where the organization intends to operate and conduct an electronic pull-tab/electronic gaming device separate from social organization's social quarter?		Yes / No
	Please provide a diagram of the facility and identify the (i) social organization's social quarter and (ii) public space.	Diagram attached?	Yes / No
h.	If "yes" is selected under question 9, then has the premises where the organization intends to operate and conduct electronic pull-tabs/electronic gaming been deemed common nuisance pursuant to § 18.2-258 of the <i>Code of Virginia</i> ?	a	
			Yes / No
	e organization wishing to amend its permit in order to conduct an annual fundraising t? If "no," then please go to question 11 of this form.	(If "yes," please review page 18)	Yes / No
FC	OR ANNUAL FUNDRAISING EVENT ONLY		
a.	If "yes" is selected under question 30, then does the qualified organization intend to use mechanical equipment to dispense the paper instant bingo, seal cards, and pull-tabs as required by § 18.2-340.26:2 of the Code of Virginia?		Yes / No
b.	If "yes" is selected under question 30, then does the qualified organization intend to make its annual fundraising event open to the public as required by § 18.2-340.26:2 the Code of Virginia?	of	Yes / No

fundraising event will occur?  Other (Explain):  If "leased facility" is selected under this particular question, then please attach a copy of the current lease that authorizes the organization to use the facility in the conduct of the annual fundraising event.  If "leased facility" is selected under this particular question, then please provide the following information:  Landlord's Corporate Name:  Landlord's Name:  First Name Middle Name Last Name  Physical Address:  City: State: Zip Code:  Telephone: Fax Number:  If "leased facility" is selected under this particular question, then please provide the following information:  Facility's Name:  Facility's Name:  Facility Manager's Name:		C	HARITABLE GAMING ACTIV	THES	
If "leased facility" is selected under this particular question, then please attach a copy of the current lease that authorizes the organization to use the facility in the conduct of the annual fundraising event.  If "leased facility" is selected under this particular question, then please provide the following information:  Landlord's Name:    First Name	C	and have title to the facility or lea		(Select One):	□ Leased Facility □ Owned Facility
attach a copy of the current lease that authorizes the organization to use the facility in the conduct of the annual fundraising event.  If "leased facility" is selected under this particular question, then please provide the following information:  Landlord's Corporate Name:  Landlord's Name:  Physical Address:  City:  Telephone:  If "leased facility" is selected under this particular question, then please provide the following information:  Facility Name:  Facility Name:  Facility Name:  Facility Name:  Facility Manager's Name:  Facility Manager's Name:  Facility Name:  Supplier's Name:  Supplier's Name:  Supplier's Name:  Supplier's Name:  Supplier's Name:  Supplier's Name:  But get a selected under question 10, then list the name of all suppliers who have offered and/or sold paper instant bir cards and/or pull-tabs to your organization, or who the organization anticipates obtaining them from:  Supplier's Name:  Supplier's Name:  But get a selected under question 10, then is the facility used by more than one organization of the purpose of conducting charitable garning activities? If "ses", is selected under question 10, then is the facility used by more than one organization of the purpose of conducting charitable garning activities? If "ses", is selected under question 11, then does the organization use or intend to use an operator to administer at Signature's section of this form.  FOR TEXAS HOLD'EM POKER TOURNAMENTS ONLY  a. If "yes" is selected under this particular question, then identify the name of the operator, which will administer organization's poken tournament?  Yes / No  If "yes" is selected under this particular question, then identify the name of the operator, which will administer organization's poken tournament?  Operator's Name:  (Please name in expense in registered as an "operator" with the Department pursuant of 11VAC20-30-50 of the Transa Hold's bornament Regulations, such as a driver's license or other government-issued identification, such as a driver's license or other government-is		Other (Explain):			
Landlord's Corporate Name:  Landlord's Name:  Physical Address:  City:  State:  Zip Code:  Telephone:  If "leased facility" is selected under this particular question, then please provide the following information:  Facility Name:  Facility Manager's Name:  First Name  Middle Name  Fax Number:  If "leased facility" is selected under this particular question, then please provide the following information:  Facility Manager's Name:  First Name  Middle Name  Last Nam  Fax Number:  If yes" is selected under question 10, then list the name of all suppliers who have offered and/or sold paper instant bir cards and/or pull-tabs to your organization, or who the organization anticipates obtaining them from:  Supplier's Name:  Supplier's Name:  Supplier's Name:  9. If "yes" is selected under question 10, then is the facility used by more than one organization for the purpose of conducting charitable garning activities? If "yes," is selected under this question, then please provide the name of each organization.  If "yes "is selected under question 11, then does the organization use or intend to use an operator to administer its poker tournament?  If "no' is selected under question 11, then does the organization use or intend to use an operator to administer its poker tournament?  If "no' is selected under this particular question, then identify the name of the operators, which will administer organization, such as a driver's license or other government-issued identification, for each individual designated as a game manager.  Operator's Name:  (Please ensure the operator is registered as an "operator" with the Department pursuant to 11/4/20-30-30 of the Texas Hold's Tournament Regulations, an organization's poker tournament.  Operator's Name:  (Please ensure the operator's invited the preceding the years.)  If "yes" is selected under this particular question, attach a copy of the operator, which will administer representative.  Copy attached? Yes / No If "yes" is selected under this particular question, one operator or int		attach a copy of the curr	ent lease that authorizes the organization t	to use the Lease	Yes / No
Landlord's Corporate Name:  Landlord's Name:  Physical Address:  City:  State:  Zip Code:  Telephone:  If "leased facility" is selected under this particular question, then please provide the following information:  Facility Name:  Facility Manager's Name:  First Name  Middle Name  Fax Number:  If "leased facility" is selected under this particular question, then please provide the following information:  Facility Manager's Name:  First Name  Middle Name  Last Nam  Fax Number:  If yes" is selected under question 10, then list the name of all suppliers who have offered and/or sold paper instant bir cards and/or pull-tabs to your organization, or who the organization anticipates obtaining them from:  Supplier's Name:  Supplier's Name:  Supplier's Name:  9. If "yes" is selected under question 10, then is the facility used by more than one organization for the purpose of conducting charitable garning activities? If "yes," is selected under this question, then please provide the name of each organization.  If "yes "is selected under question 11, then does the organization use or intend to use an operator to administer its poker tournament?  If "no' is selected under question 11, then does the organization use or intend to use an operator to administer its poker tournament?  If "no' is selected under this particular question, then identify the name of the operators, which will administer organization, such as a driver's license or other government-issued identification, for each individual designated as a game manager.  Operator's Name:  (Please ensure the operator is registered as an "operator" with the Department pursuant to 11/4/20-30-30 of the Texas Hold's Tournament Regulations, an organization's poker tournament.  Operator's Name:  (Please ensure the operator's invited the preceding the years.)  If "yes" is selected under this particular question, attach a copy of the operator, which will administer representative.  Copy attached? Yes / No If "yes" is selected under this particular question, one operator or int		If "leased facility" is sele-	cted under this particular question, then ple	ease provide the following	information:
Physical Address:  City:  State:  Zip Code:  Telephone:  If "leased facility" is selected under this particular question, then please provide the following information:  Facilitys Name:  Facilitys Name:  Facilitys Name:  Facilitys Manager's Name:  First Name  Middle Name  Last Nam  Telephone:  If "leased facility" is selected under this particular question, then please provide the following information:  Fax Number:  d. If "yes" is selected under question 10, then list the name of all suppliers who have offered and/or sold paper instant bir cards and/or pull-tabs to your organization, or who the organization anticipates obtaining them from:  Supplier's Name:  Supplier's Name:  Supplier's Name:  Supplier's Name:  Supplier's Name:  e. If "yes" is selected under question 10, then is the facility used by more than one organization for the purpose of conducting charitable gaming activities? If "yes," is selected under this question, then please provide the name of each organization utilizing this facility on a separate page.  Yes / No  If "yes" is selected under question 11, then does the organization use or intend to use an operator to administer its poker tournament?  If "no" is selected under question 11, then does the organization use or intend to use an operator to administer its poker tournament?  If "yes" is selected under this particular question, attach a copy of a current photo identification, such as a driver's license or other government-issued identification, such as a driver's license or other government-issued identification, such as a driver's license or other government-issued identification, such as a driver's license or other government gursuant to ITA/C20-30-50 of the Taxas Hold's tournament Regulations. Received of any insurant to ITA/C20-30-50 of the Taxas Hold's tournament Regulations, and a page to the procedure is a special with the Department gursuant to ITA/C20-30-50 of the Taxas Hold's tournament Regulations, an organization or organization, attach a copy the unrement Regulations, an orga		Landlord's Corpora	te Name:		
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photo identification, such as a driver's license or other government-issued identification, for each individual designated as a game manager.  Copy attached? Yes / No  If "yes" is selected under this particular question, then identify the name of the operator, which will administer organization's poker tournament.  Operator's Name:  (Please ensure the operator is registered as an "operator" with the Department pursuant to 11VAC20-30-50 of the Texas Holder Tournament Regulations. Pursuant to 11VAC20-30-70 of the Texas Holder Poker Tournament Regulations, an organization's or gaming permit may be suspended, revoked, or denied if any person participating in the operator's administration of Texas Holder tournaments has been (1) convicted of any felony within the preceding 10 years; or (2) convicted of any misdemeanor involving from the preceding five years.)  If "yes" is selected under this particular question, attach a copy the current photo identification, such as a driver's license or other government-issued identification for each individual designated as a charitable host representative.  Copy attached? Yes / No  If "yes" is selected under this particular question, attach a copy of the operator's internal control policies and procedures.  Copy attached? Yes / No  If "yes" is selected under this particular question, attach a copy of the written contract between the organization and its operator.  Copy attached? Yes / No  If "yes" is selected under this particular question, does the organization, member of the organization, person affiliated or associated with the organization, or immediate family member or person residing in the household of a member of the organization or of a person affiliated or associated with the organization directly or indirectly have any interest or	а			end to use	Yes / No
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(Please ensure the operator is registered as an "operator" with the Department pursuant to 11VAC20-30-50 of the Texas Hold'en Tournament Regulations. Pursuant to 11VAC20-30-70 of the Texas Hold'em Poker Tournament Regulations, an organization's c gaming permit may be suspended, revoked, or denied if any person participating in the operator's administration of Texas Hold'e tournaments has been (1) convicted of any felony within the preceding 10 years; or (2) convicted of any misdemeanor involving for or financial crimes within the preceding five years.)  If "yes" is selected under this particular question, attach a copy the current photo identification, such as a driver's license or other government-issued identification for each individual designated as a charitable host representative.  Copy attached? Yes / No  If "yes" is selected under this particular question, attach a copy of the operator's internal control policies and procedures.  Copy attached? Yes / No  If "yes" is selected under this particular question, attach a copy of the written contract between the organization and its operator.  Copy attached? Yes / No  If "yes" is selected under this particular question, does the organization, member of the organization, person affiliated or associated with the organization, or immediate family member or person residing in the household of a member of the organization directly or indirectly have any interest or		· ·		• • •	
photo identification, such as a driver's license or other government-issued identification for each individual designated as a charitable host representative.  Copy attached? Yes / No  If "yes" is selected under this particular question, attach a copy of the operator's internal control policies and procedures.  Copy attached? Yes / No  If "yes" is selected under this particular question, attach a copy of the written contract between the organization and its operator.  Copy attached? Yes / No  If "yes" is selected under this particular question, does the organization, member of the organization, person affiliated or associated with the organization, or immediate family member or person residing in the household of a member of the organization or of a person affiliated or associated with the organization directly or indirectly have any interest or		(Please ensure the op Tournament Regulatio gaming permit may be	ns. Pursuant to 11VAC20-30-70 of the Texas Hold'en e suspended, revoked, or denied if any person particip (1) convicted of any felony within the preceding 10 ye	n Poker Tournament Regulation pating in the operator's administre ears; or (2) convicted of any miso	s, an organization's charitable ration of Texas Hold'em poker
If "yes" is selected under this particular question, attach a copy of the operator's internal control policies and procedures.  If "yes" is selected under this particular question, attach a copy of the written contract between the organization and its operator.  Copy attached? Yes / No  If "yes" is selected under this particular question, does the organization, member of the organization, person affiliated or associated with the organization, or immediate family member or person residing in the household of a member of the organization or of a person affiliated or associated with the organization directly or indirectly have any interest or		photo identification, such identification for each inc	n as a driver's license or other government	-issued	Voc / No
If "yes" is selected under this particular question, attach a copy of the written contract between the organization and its operator.  Copy attached? Yes / No  If "yes" is selected under this particular question, does the organization, member of the organization, person affiliated or associated with the organization, or immediate family member or person residing in the household of a member of the organization or of a person affiliated or associated with the organization directly or indirectly have any interest or		If "yes" is selected under		he	
If "yes" is selected under this particular question, does the organization, member of the organization, person affiliated or associated with the organization, or immediate family member or person residing in the household of a member of the organization or of a person affiliated or associated with the organization directly or indirectly have any interest or		If "yes" is selected under	r this particular question, attach a copy of the	he written	
organization contracts to administer its poker tournament?  Yes / No		If "yes" is selected unde member of the organizat organization, or immedia household of a member associated with the orga ownership in, or receive	this particular question, does the organization, person affiliated or associated with the ate family member or person residing in the of the organization or of a person affiliated inization directly or indirectly have any intercompensation from, an operator with which	ation, e e d or rest or	

	CHARIT	ABLE GAMING ACT	IVITIES		
b.	If "yes" is selected under question 11, then of lease the facility; or (ii) own and have title to Hold'em Poker Tournament is to be conducted.	the facility where the Texas	(Selec	t One):	□ Leased Facility □ Owned Facility
	Is the facility used by more than on conducting charitable gaming activing the please provide the nacility on a separate page.	ities? If "yes," is selected und	der this		Yes / No
	If "leased facility" is selected under copy of the current lease for the fac Tournament is to be conducted by	cility where the Texas Hold'em		Lease attached?	Yes / No
	If "leased facility" is selected under organization, member of the qualificassociated with the qualified organiperson residing in the household of a person affiliated or associated indirectly receive any payment from poker tournament occurs or from the members, or persons residing in the payment is directly related to a writthold a poker tournament as requires Charitable Gaming Regulations and electronic fund transfer from the lar organization's charitable gaming actification.	ed organization, person affiliar ization, or immediate family me famember of the qualified organization the landlord of the facility where agents, employees, immediate household of the landlord (uten contract to lease a facility ed by 11VAC20-20-120 (A) of d such payment is made by clandlord directly to the qualified ecount)?	ted or nember or ganization or n directly or nere the diate family unless such for use to the heck or	e the following	Yes / Noinformation:
	Landlord's Corporate Name:	and paradual quodien, then	produce provide	o alo lollo milig	mormatori.
	Landlord's Name:				
	Physical Address:	First Name	Middle Name		Last Name
	City:	State:	Zip Code:		_
	Telephone:			Fax Number:	
C.	If "yes" is selected under question 11, attack criteria established in 11VAC20-30-60 (Q) o Regulations.			Copy attached?	Yes / No
d.	If "yes" is selected under question 11, then tall persons, including the operator's employed or agents, involved in the management, ope poker tournament are trained in the use of a procedures relevant to the person's function poker game, and on the Charitable Gaming Regulations, and Charitable Gaming Regulations.	ees, independent contractors, eration, conduct, or administra any equipment, on the policies n, on the person's responsibilit Law, Texas Hold'em Poker T ations. Please provide a copy	, volunteers, ation of a s and ties, on the ournament		
	training course to be approved in advance b	y the department.		Copy attached?	Yes / No
e.	If "yes" is selected under question 11, then I poker/tournament chips to your organization				
	Supplier's Name:				
	Supplier's Name:				
	Supplier's Name:				

# **DISCLAIMER & SIGNATURE**

that I have conditions Regulation permit. I a organization Regulation organization information	not knowingly made a fals as set out under the Char is. I understand that untrulso agree that the organization will abide by the Charitatis during the management on is responsible for the conton the form changes or is	ovided in this form and attachrese statement of material fact or itable Gaming Law, Texas Holethful or misleading answers areation listed on this form and its able Gaming Law, Texas Holdter, operation and conduct of characteristics of any operator administs found to be inaccurate, then ce with the Charitable Gaming	n this form, and that I have d'em Poker Tournament Ro e cause for denial of the ar officers, directors, member Poker Tournament Regritable gaming activities. I tering its Texas Hold'em Pothe organization shall notify	read and unders egulations, and Conendment to the rs, and individual ulations, and Chaunderstand that to be r Tournament of the department	stand the terms and Charitable Gaming charitable gaming ls affiliated with the aritable Gaming the charitable . I understand that if any and provide the updated
signature:				Date:	
ull Name:				Office/ Position Title:	
	Complete First Name	Complete Middle Name	Complete Last Name		

# STANDALONE RAFFLE REQUIREMENTS

Information/questions in this particular section must be completed/answered in its entirety for each standalone raffle, if the organization intends to conduct a standalone raffle outside of a bingo session. Organizations are responsible for ensuring their compliance with all State and Federal laws when conducting its standalone raffle activities.

# **RAFFLE TICKETS**

(Attach a sample copy of each standalone raffle ticket.)

Each raffle ticket must conform to the requirements of 11VAC20-20-140 (C) of the Charitable Gaming Regulations, including, but not limited to, raffle tickets being sequentially numbered and having a detachable section, with one portion going to the seller and the other portion to the purchaser.

The portion that is retained by the <u>Seller</u> must include:		The portion that goes to the <u>Purchaser</u> must include, but is not limited to:		
	The purchasers name, complete address and contact telephone number.	The ticket number. The selling price of each ticket.		
	The matching sequential ticket number to the portion	The prize(s) to be awarded.		
	_ provided to the purchaser.	The date, time, and physical location of the drawing.		
		The name, address and telephonenumber of the organization.		
		The charitable gaming permit number (after issuance by the Department).		

NOTE: Raffle tickets may not be printed until the organization is authorized in writing to do so by OCRP.

#### RAFFLE NARRATIVE

(Please use a separate sheet to answer the following questions.)

Please provide a written narrative describing how the organization will conduct the raffle. Please be very specific and detailed. This narrative must include, but is not limited to, the following:

#### Part I - Scope and Purpose of Raffle

- a. How many raffle tickets will be printed?
- b. How much will each raffle ticket cost?
- c. What are the anticipated gross receipts (Multiply Line A by Line B)
- d. What will happen if the raffle is not successful such as not all of the tickets are sold to pay for the raffle prize?
- e. Attach a copy of the rules of play that will govern each standalone raffle, as required by question 5 on the form. Please explain how raffle ticket purchasers will receive these rules?
- f. For all prizes identified in question 7c of the form, please provide a letter of intent from the individual/business from which the prize is being purchased/donated stating the (i) terms and conditions of the transaction(s), if any and (ii) the fair market value of the prize. This letter from a business needs to be written on the business letterhead, signed and dated from an authorized person. If the organization already owns the prize, which is <u>not</u> a motor vehicle, motorcycle, boat, or trailer, then please provide confirmation of its possession of the prize and/or receipt. If the organization already owns the prize, which is a motor vehicle, motorcycle, boat or trailer, then please provide a copy of the original bill of sale or title.

#### Part 2 - Sales Distribution

- a. How will the money from the sales of raffle tickets be controlled; accounted for; and collected from purchasers and sellers?
- b. How will the distribution and the selling of raffle tickets be handled?
- c. Pursuant to 11VAC20-20-90 (C) of the Charitable Gaming Regulations, it states, "[w]inning tickets and unsold tickets shall be maintained for three years following the close of the fiscal year." As such, does the organization intend to collect unsold raffle tickets from sellers and where does it intend to store these unsold and winning raffle tickets during this three year time frame?
- d. Please provide any other information pertinent to the sales distribution of the raffle tickets.

#### Part 3 - Drawing Process and Prize Winners

- a. Who will conduct the raffle drawing?
- b. Describe the drawing process.
- c. If applicable, provide a copy of the current lease that authorizes the organization to use the facility in the conduct of the drawing for its raffle, as required by question 7i of the form.
- d. How will the prizes be distributed? Does the winner need to be present? How many days does the winner have to claim the prize? What happens if the winner does not claim the prize?
- e. Please provide any other information pertinent to the drawing process and/or prize winners of the raffle ticket.

Form 202

# **ANNUAL FUNDRAISING EVENT REQUIREMENTS**

Information/questions in this particular section must be completed/answered in its entirety for the activity conducted in accordance with § 18.2-340.26:2 of the *Code of Virginia*. Organizations are responsible for ensuring their compliance with all State and Federal laws when conducting its annual fundraising event.

## STATUTORY REQUIREMENTS

§ 18.2-340.26:2 of the *Code of Virginia* provides that "[a]s a part of its annual fundraising event, any qualified organization may sell instant bingo, pull tabs, or seal cards, provided that (i) any such instant bingo, pull tabs, or seal cards are dispensed by mechanical equipment only; (ii) the sale of the same is limited to a single event of no more than seven days per calendar year; (iii) any such event is open to the public; and (iv) no such organization realizes actual gross receipts of more than \$40,000 from the conduct of all charitable gaming other than raffles on a total of no more than seven days per calendar year."

# **ACTIVITY REQUIREMENTS**

- 1. The organization must have a valid charitable gaming permit issued by OCRP.
- 2. In accordance with § 18.2-340.26:2 of the Code of Virginia, no qualified organization conducting an annual fundraising event shall realize actual gross receipts of more than \$40,000 from the conduct of all charitable gaming other than raffles on a total of no more than seven days per calendar year.
- 3. The organization must ensure compliance with the following requirements while conducting an annual fundraising event:
  - a. In accordance with § 18.2-340.26:2 of the *Code of Virginia*, the paper instant bingo, pull-tabs or seal cards are required to be sold only as part of a single annual fundraising event that occurs once a calendar year.
  - b. The organization cannot conduct paper instant bingo, pull-tab, or seal card activities on any day, at any time, or at any other premises not specified on the organization's charitable gaming permit.
  - c. The organization cannot conduct any other charitable gaming activity at its annual fundraising event, including, but not limited to, bingo, 50/50 raffles, basket bingo, etc., unless it is specified on the organization's charitable gaming permit.
  - d. The event must be open to the public as required by § 18.2-340.26:2 of the Code of Virginia.
  - e. The charitable gaming permit and the flare for each deal of paper instant bingo, pull-tab or seal card must be prominently posted.
  - f. No paper instant bingo, pull-tab or seal card may be sold at a price different from the price printed on the ticket by the manufacturer on either the instant bingo, pull-tab, seal card or flare.
  - g. The organization must purchase all deals of paper instant bingo, pull-tabs or seal cards from a licensed charitable gaming supplier.
  - h. The invoice for each paper instant bingo, pull-tab or seal card being offered for sale or sold during the referenced annual fundraising event shall be on the premises at all times listed on the permit.
  - Winning paper instant bingo, pull-tab or seal card tickets shall only be redeemed at the date/time/location indicated on the organization's charitable gaming permit.
  - j. No paper instant bingo, pull-tab or seal card ticket shall be provided or sold to any person under 18 years of age. No individual under 18 years of age shall play or redeem any paper instant bingo, pull-tab or seal card ticket.
  - k. All paper instant bingo, pull-tab, and seal card supplies utilized at the referenced annual fundraising event shall be paid for only by check drawn on the organization's charitable gaming account. All monies related to the annual fundraising event must be deposited into the organization's charitable gaming account within two business days after the conclusion of the event.
  - I. All recordkeeping requirements and financial reporting requirements under § 18.2-340.16 et seq. of the Code of Virginia and the Charitable Gaming Regulations must be adhered to.
  - m. All unsold paper instant bingo, pull-tab, and seal card games shall be inventoried at the close of the annual fundraising event, and held in accordance with § 18.2-340.16 et seq. of the Code of Virginia and the Charitable Gaming Regulations.