

COLLEGE COMMUNITY SCHOOL DISTRICT

INTER OFFICE COMMUNICATION

TO: Administrators
Activity Sponsors

FROM: Angie Morrison, Chief Financial Officer

SUBJECT: RAFFLE/BINGO/GAMES OF CHANCE

Regulations on us for the handling of gambling proceeds which includes **raffles, bingo, and games of chance** can be confusing.

The attached application must be completed prior to starting a **raffle or games of chance**. (make copies as needed) This form must be filled out after you have received permission using the online form to conduct a fundraiser. The completed form must be sent to my attention in the Business Office. Each event will be assigned a code (Example: 02-09). The request must be approved by a building principal or the activities director. Attach a copy of ANY information you are distributing to the public on the **raffle or games of chance**. Fundraising that does not include raffles, bingos, or games of chance do not have to fill out this additional form.

The event sales will be deposited into a central account (B91-0000-000-0000-499-074). The description should include the event code number. Raffle tickets cannot exceed \$1.00 in price and participants **cannot** be expected to be in attendance to win. A copy of the raffle ticket must be attached to the first deposit slip.

Total prize value for a single raffle cannot exceed \$10,000 and cannot be cash. Each individual prize value must be under \$600.

Prizes need to be purchased ahead of time and not paid for directly from the sales.

The completed application needs to be approved by the central office.

Revised 7/19



APPLICATION TO CONDUCT A RAFFLE/GAMES OF CHANCE

The following application must be completed PRIOR TO conducting a raffle or games of chance (Carnival).

ORGANIZATION CONDUCTING EVENT: _____

REVENUE CODE FOR PROCEEDS OF EVENT: _____

DESCRIBE WHAT THE PROCEEDS ARE GOING TO BE USED FOR: _____

SPONSOR OF EVENT (Must be employee): _____

DATE OF APPLICATION: _____

BEGINNING DATE OF EVENT: _____ ENDING DATE: _____

COST OF RAFFLE TICKET (Attach copy to first deposit)\$ _____

Event sales must be deposited in B91-0000-000-0000-499-074

Description should include event code assigned below

GOAL OF EVENT (Amount expected to be raised) \$ _____

PRIZE TO BE AWARDED _____

VALUE OF PRIZE (Individual prize value may not exceed \$600; Total prize value may not exceed \$10,000) \$ _____

Prize may be donated/state estimated value

PRELIMINARY APPROVAL _____

(Principal/Activity Director)

OFFICE USE:

EVENT CODE: _____ - _____

FINAL APPROVAL _____

(Central Office Administrator)

DATE APPROVED: _____

Revised 8/19