

**TOWN OF STAFFORD**  
**Office of the First Selectman**

1 Main Street  
 Stafford Springs, CT 06076  
 Email: staffordtownhall@staffordct.org  
 Web site: www.staffordct.org  
 Phone: 860-684-1777



**TEN DAY BINGO REPORT**

- ATTENTION: 1. File completed report within 10 days after bingo session.  
 2. Submit check payable to Town of Stafford  
 3. Mail report to Office of the First Selectman, 1 Main St., Stafford, CT 06076

|                          |                |                             |                   |
|--------------------------|----------------|-----------------------------|-------------------|
| NAME OF ORGANIZATION     |                |                             | PERMIT NUMBER     |
| ADDRESS (No. and Street) |                |                             | TELEPHONE NUMBER  |
| (City or Town)           |                | (State)                     | (Zip Code)        |
| DATE OF SESSION          | DAY OF SESSION | TIME OF SESSION<br>pm to pm | NUMBER OF PLAYERS |

**SCHEDULE 1. BINGO INCOME STATEMENT**

**A. REVENUE**

| TYPE OF SALE    | Identifiable Admissions | WTA #1     | WTA #2      | Package Sales | Special #1  | Special #2  | Special #3  | Special #4  | Special #5  | Special #6  | Special #7  |
|-----------------|-------------------------|------------|-------------|---------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| NUMBER OF CARDS |                         |            |             |               |             |             |             |             |             |             |             |
| PRICE           |                         |            |             |               |             |             |             |             |             |             |             |
| GAME RECEIPTS   |                         |            |             |               |             |             |             |             |             |             |             |
| TYPE OF SALE    | Special #8              | Special #9 | Special #10 | Special #11   | Special #12 | Special #13 | Special #14 | Special #15 | Special #16 | Special #17 | Special #18 |
| NUMBER OF CARDS |                         |            |             |               |             |             |             |             |             |             |             |
| PRICE           |                         |            |             |               |             |             |             |             |             |             |             |
| GAME RECEIPTS   |                         |            |             |               |             |             |             |             |             |             |             |

1. Total bingo game receipts (from schedule above) ..... \$ \_\_\_\_\_  
 2. Sales of supplies ..... \$ \_\_\_\_\_  
 3. Other receipts (explain ( \_\_\_\_\_ ) ) \$ \_\_\_\_\_  
 4. TOTAL REVENUE (add items 1 through 3) ..... \$ \_\_\_\_\_

**B. EXPENSES**

1. Cash prizes (Schedule 2, part A, TOTAL plus schedule 2, part C, TOTAL CASH DOOR PRIZES) ..... \$ \_\_\_\_\_  
 2. Fee paid to Town of Stafford (Schedule 3, line 5) Check Number \_\_\_\_\_ \$ \_\_\_\_\_  
 3. Other expenses and/or Goodwill Payments (actually paid)

| CHECK NO. | NAME OF PAYEE | DESCRIPTION | AMOUNT |
|-----------|---------------|-------------|--------|
| a.        |               |             |        |
| b.        |               |             |        |
| c.        |               |             |        |
| d.        |               |             |        |

- Total other expenses (add items a through d) ..... \$ \_\_\_\_\_  
 4. TOTAL EXPENSES (add items 1 through 3) ..... \$ \_\_\_\_\_

**C. NET PROFIT (LOSS)**

1. Net Profit (Loss) (from Part A, Line 4, TOTAL REVENUE, deduct Part B, line 4, TOTAL EXPENSES) ..... \$ \_\_\_\_\_

|                          |                 |       |                         |                 |
|--------------------------|-----------------|-------|-------------------------|-----------------|
| STARTING CASH BANK<br>\$ | DEPOSIT MADE BY | PIN # | AMOUNT OF DEPOSIT<br>\$ | DATE OF DEPOSIT |
|--------------------------|-----------------|-------|-------------------------|-----------------|

**SCHEDULE 2. LIST OF PRIZES**

**A. SUMMARY OF CASH BINGO GAME PRIZES**

| PRIZE  | NO. OF GAMES | TOTALS |
|--|--------------|--------|
| WTA #1   |              | \$ *   |
| WTA #2   |              | \$ *   |
| \$   |              | \$     |
| \$   |              | \$     |
| \$   |              | \$     |
| \$   |              | \$     |
| \$   |              | \$     |
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| \$   |              | \$     |
| \$   |              | \$     |
| \$   |              | \$     |
| \$   |              | \$     |
| Amount of <b>Special Grand Prize #1</b> for this session |              | \$     |
| Amount of <b>Special Grand Prize #2</b> for this session |              | \$     |
| Breakage   |              | \$     |
| <b>TOTAL</b>   |              | \$     |

\*Amount awarded after 10% has been deducted

**C. DOOR PRIZE(S)**

| MERCHANDISE DOOR PRIZE SECTION         |       |
|--|-------|
| DESCRIPTION                            | VALUE |
|  | \$    |
|  | \$    |
|  | \$    |
| <b>TOTAL MERCHANDISE DOOR PRIZE(S)</b> | \$    |
| CASH DOOR PRIZE SECTION                |       |
|  |       |
| <b>TOTAL CASH DOOR PRIZE (S)</b>       | \$    |

**SCHEDULE 3. CALCULATION OF FEE**

|    |   |    |
|----|---|----|
| 1. | Total bingo game receipts (schedule 1, part A, line 1)        | \$ |
| 2. | Total cash bingo game prizes (schedule 2, part A, Total)      | \$ |
| 3. | Total merchandise bingo game prizes (schedule 5, Grand Total) | \$ |
| 4. | Net receipts (deduct lines 2 and 3 from line 1)               | \$ |
| 5. | Total fee due Town of Stafford (multiply line 4 by .05)       | \$ |

**B. SPECIAL GRAND PRIZE #1 (PROGRESSIVE)**

| SESSION DATE                                 | AMOUNT |
|--|--------|
| Week #1                                      | \$     |
| Week #2                                      | \$     |
| Week #3                                      | \$     |
| Week #4                                      | \$     |
| Week #5                                      | \$     |
| Week #6                                      | \$     |
| Week #7                                      | \$     |
| Week #8                                      | \$     |
| Week #9                                      | \$     |
| Week #10                                     | \$     |
| Week #11                                     | \$     |
| Week #12                                     | \$     |
| Week #13                                     | \$     |
| Week #14                                     | \$     |
| Week #15                                     | \$     |
| Week #16                                     | \$     |
| <b>TOTAL PAID FOR SPECIAL GRAND PRIZE #1</b> | \$     |

**D. SPECIAL GRAND PRIZE #2 (PROGRESSIVE)**

| SESSION DATE                                 | AMOUNT |
|--|--------|
| Week #1                                      | \$     |
| Week #2                                      | \$     |
| Week #3                                      | \$     |
| Week #4                                      | \$     |
| Week #5                                      | \$     |
| Week #6                                      | \$     |
| Week #7                                      | \$     |
| Week #8                                      | \$     |
| Week #9                                      | \$     |
| Week #10                                     | \$     |
| Week #11                                     | \$     |
| Week #12                                     | \$     |
| Week #13                                     | \$     |
| Week #14                                     | \$     |
| Week #15                                     | \$     |
| Week #16                                     | \$     |
| <b>TOTAL PAID FOR SPECIAL GRAND PRIZE #2</b> | \$     |

**LIST WINNER(S) FOR SPECIAL GRAND PRIZE(S):**

| CHECK NO. | NAME OF PAYEE | AMOUNT |
|-----------|---------------|--------|
|           |               | \$     |
|           |               | \$     |
|           |               | \$     |
|           |               | \$     |
|           |               | \$     |

**SCHEDULE 4. DISPOSITION OF, AND ACCOUNTING FOR NET PROFIT (Contribution/Donation)**

| DATE                       | CHECK NO. | NAME OF PAYEE | DESCRIPTION | AMOUNT |
|----------------------------|-----------|---------------|-------------|--------|
| 1.                         |           |               |             |        |
| 2.                         |           |               |             |        |
| <b>TOTAL DISBURSEMENTS</b> |           |               |             | \$     |

**I DO HEREBY MAKE OATH THAT THE STATEMENT IN THE FOREGOING REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE AND ACCURATE.**

**FOR OFFICE USE ONLY**

|   |       |                  |              |
|---|-------|------------------|--------------|
| SIGNATURE OF MEMBER-IN-CHARGE/DESIGNEE OF BINGO SESSION | PIN # | DATE             | Check Number |
| SIGNATURE OF RANKING OFFICER                            | PIN # | DATE             |              |
| FORM PREPARED BY (Please Print)                         | PIN # | TELEPHONE NUMBER | Amount<br>\$ |

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 Stafford, CT 06076  
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 Web site: [www.staffordct.org](http://www.staffordct.org)



|                          |                 |                    |
|--------------------------|-----------------|--------------------|
|                          |                 | PERMIT NUMBER      |
| NAME OF ORGANIZATION     | DATE OF SESSION |                    |
| ADDRESS (No. and Street) | (City or Town)  | (State) (Zip Code) |

**SCHEDULE 5. MERCHANDISE BINGO GAME PRIZES**

| GAME NUMBER  | DESCRIPTION OF PRIZE(S) | VALUE OF PRIZE(S) |
|--------------|-------------------------|-------------------|
|              |                         | \$                |
|              |                         | \$                |
|              |                         | \$                |
|              |                         | \$                |
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|              |                         | \$                |
|              |                         | \$                |
|              |                         | \$                |
|              |                         | \$                |
|              |                         | \$                |
| TOTAL page 1 |                         | \$                |

| GAME NUMBER | DESCRIPTION OF PRIZE(S) | VALUE OF PRIZE(S) |
|-------------|-------------------------|-------------------|
|             |                         | \$                |
|             |                         | \$                |
|             |                         | \$                |
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|             |                         | \$                |
|             |                         | \$                |
|             |                         | \$                |
|             |                         | \$                |
|             | TOTAL page 2            | \$                |
|             | TOTAL page 1            | \$                |
|             | GRAND TOTAL             | \$                |