

# MONTHLY BINGO AND/OR LUCKY 7 GAME DATE REQUEST FORM

OFFICIAL USE ONLY
Receipt #:
License #:
Date:

	1.	CHARITAB	LE ORGANI	ZATION'S I	NFORMATI	ON		
Organization's	Name:							
Organization's	Address:							
	Street/PO	Rox	City	v/Town	St	 ate	Zip	
Phone Number:			Organization's Email:				Σιρ	
2. APPLICATION TYPE								
Organization is requesting game dates for (choose one):								
☐ Bingo (No Lucky 7) ☐ Bingo & Lucky 7 ☐ Lucky 7 (No Bingo)								
3. GAMING LOCATION								
Bingo games and/or Lucky 7 ticket sales will be held (choose one):								
☐ At a licensed Commercial Bingo Hall								
☐ At a location owned by the Charitable Organization submitting this request form								
☐ At a licensed Games of Chance Facility (Lucky 7 played without Bingo)								
☐ At a special event (such as a fair or annual conference)								
Name of Location:								
Physical Address (location where games will be held):								
Street			City/Town			ate	Zip	
4. GAME DATES								
			T 0111/11	1	1			
1.	2.	3.	4.	5.	6.	7.	8.	
9.	10.	11.	12.	13.	14.	15.	16.	
Organizations may hold up to 16 game dates per month. All game dates listed above must be within the same calendar month.								
5. ATTESTATION								
I hereby certify that I am an official of the Charitable Organization authorized to sign and submit this application. I further								
certify, under penalty of unsworn falsification pursuant to RSA 641:3, that the information provided on this form and on any of the supporting documentation submitted with this application is true, accurate and complete, and that there are no								
willful misrepresentations in, or falsifications of the information provided herein. I acknowledge that giving false								
information is grounds for denial, suspension, or revocation of a gaming license.								
Signature of Authorized Official*  Printed Name							Date	

\*Authorized Official must be an individual identified in Section 4 of the "Charitable Organization Eligibility Determination" application. Proof of authority to sign and submit this application may be required.

# INSTRUCTIONS FOR COMPLETING A MONTHLY BINGO AND/OR LUCKY 7 GAME DATE REQUEST FORM

#### A. LICENSING FEE

Please include the following payment based on your selection in section 2:

- ➤ Bingo (*No Lucky 7*) payment of \$25.00 per bingo game date.
- ➤ Bingo & Lucky 7 payment of \$25.00 per bingo game date plus a \$10.00 lucky 7 license fee.
- Lucky 7 (*No Bingo*) payment of a \$10.00 lucky 7 license fee.

Checks and or money orders must be made payable to "NH LOTTERY COMMISSION".

## B. SUBMITTING THE GAME DATE REQUEST FORM

Form must be received by the New Hampshire Lottery Commission at least 15-days, but no more than 45-days prior to the organizations first proposed bingo and/or lucky 7 game date.

Submit the completed form and license fee to:

NEW HAMPSHIRE LOTTERY COMMISSION ATTN: INVESTIGATION & COMPLIANCE DIVISION 14 INTEGRA DR, CONCORD, NH 03301

Incomplete or incorrect forms will be returned to the applicant. This will delay the issuance of a license.

Please be aware that submission of an "Charitable Organization Eligibility Determination" application is required before a charitable organization can be authorized to operate or participate in charitable gaming.

If any information provided on or with the form changes or is found to be inaccurate, the applicant must submit updated or corrected information to the NH Lottery's Investigation & Compliance Division within 10 days of the event that resulted in the change, or discovery of the inaccuracy.

## C. QUESTIONS OR CONCERNS

Questions in regards to this form? Contact the NH Lottery Investigation & Compliance Division by phone at (603) 271-7613 or by email at <a href="mailto:licensing@lottery.nh.gov">licensing@lottery.nh.gov</a> OR visit our website at <a href="mailto:www.racing.nh.gov">www.racing.nh.gov</a>.