



# Indigenous Gaming Regulators Inc.

Suite 400 - 203 Packham Avenue, Saskatoon, Saskatchewan S7N 4K5

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## YEAR END FINANCIAL REPORT - CLASS 'B' BINGO LICENSEES

To be completed by Class B Charities. Class B charities that do not have a Breakopen Licence need to report only the Bingo 'net proceeds' and 'use of proceeds', from Line 'D' onwards)

<b>Part 1</b>	<b>Organization Information</b>
Licence Number:	Bingo: _____ Breakopen (if applicable): _____
Organization Name:	

<b>Part 2</b>	<b>Summary of Annual Activity</b>
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**TOTAL PROFIT FROM THE SALE OF BREAKOPEN TICKETS** \$ \_\_\_\_\_ (A)  
(for the year or period your licence was issued for)

**ACTUAL AMOUNTS SPENT ON BREAKOPEN EXPENSES**

Include the cost of breakopen tickets and all other amounts that have actually been spent on breakopen event expenses this licence year and provide a description (use separate sheet if necessary):

	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**TOTAL EXPENSES** \$ \_\_\_\_\_ (B)

**NET PROCEEDS FROM BREAKOPEN SALES (Line A minus B)** \$ \_\_\_\_\_ (C)

**NET BINGO PROCEEDS (Total amount received from Bingo events)** \$ \_\_\_\_\_ (D)

**TOTAL NET PROCEEDS FOR THE CHARITY (C plus D)** \$ \_\_\_\_\_ (E)

**AMOUNTS SPENT ON CHARITABLE/RELIGIOUS OBJECTS OR PURPOSES FROM TOTAL NET PROCEEDS (Line E)**

Include all amounts that have actually been spent this licence year and provide a description (use separate sheet if necessary):

	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**TOTAL** \$ \_\_\_\_\_ (F)

**AMOUNT CARRIED FORWARD (Line E minus F)** \$ \_\_\_\_\_ (G)  
(amounts carried forward are to be used within one year of the expiry of your licence)

<b>Part 3</b>	<b>Certification</b>
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This is to certify that the above information provided in this report is true and correct and that the proceeds will be used for the charitable objects or purposes as approved by the Indigenous Gaming Regulators.

Certified correct this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

by \_\_\_\_\_  
Print Name Position Signature

Business Phone: \_\_\_\_\_ Residence Phone: \_\_\_\_\_