



New Jersey Office of Attorney General
Division of Consumer Affairs
Legalized Games of Chance Control Commission
124 Halsey Street, 6th Floor, P.O. Box 46000
Newark, New Jersey 07101
(973) 273-8000

Instructions for Filing the Bingo Report of Operations

Pursuant to N.J.A.C. 13:47-9.1, licensees are to file a report of operations with the Legalized Games of Chance Control Commission (“Commission”) no later than the 15th day of the calendar month immediately following the calendar month in which the licensed activity was held, operated or conducted.

You may download this report and complete ALL of the entries for each occasion(s) relating to the conduct of bingo. Once completed, a member/officer shall certify that he/she has reviewed the report and that the information provided is true, accurate and complete. This will require the person to state his/her name and title, and sign the document before a notary public.

Bingo Report of Operations completed must be mailed to the Legalized Games of Chance Control Commission, P.O. Box 46000, Newark, New Jersey 07101.

However, for your convenience, we offer the ability to file reports electronically via e-mail. To employ this option, you must do a “SAVE AS” of the report, and place it onto your personal computer. Complete the report by using the “TAB” key to maneuver through each field.

Upon completion, the member/officer shall certify by placing a check in the box provided, that he/she has reviewed the report and that the information provided is true, accurate and complete. Subsequently, the person must state his/her name and title. Reports that are not properly certified will be sent or e-mailed back.

Bingo Report of Operations completed online must be e-mailed to the Commission at PetermanA@dca.lps.state.nj.us .

It is recommended that you maintain a copy of all reports as part of the organization’s records.



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Bingo Report of Operations

Please print clearly.

Identification number _____

Municipality _____ License number _____

Name of licensee _____

Organization _____

Street address _____

City _____

State _____

ZIP code _____

Location of games _____

This report, as required by N.J.S.A. 5:8-37 and N.J.A.C. 13:47-9, must be filed with the Legalized Games of Chance Control Commission no later than the 15th day of the month following the conduct of the game(s) of chance.

Occasion 1 Date _____ Time _____ Number of players _____

1. Regular games sales	\$ _____	9. Regular games payout	\$ _____	16. Rentals	\$ _____
2. Special games sales	\$ _____	10. Special games payout	\$ _____	17. Supplies/equip.	\$ _____
3. 50/50 Bingo games sales	\$ _____	11. 50/50 Bingo games payout	\$ _____	18. Comp. Workers	\$ _____
4. Multicolor games sales	\$ _____	12. Multicolor games payout	\$ _____	19. Total expenses	\$ _____
5. Progressive games sales	\$ _____	13. Progressive jackpot/cons.	\$ _____		
6. Predraw games sales	\$ _____	14. Predraw payout	\$ _____		
7. Electronic hand-held sales	\$ _____				
Adm. cards	\$ _____				
8. Total sales	\$ _____	15. Total payout	\$ _____	20. Net proceeds	\$ _____

Occasion 2 Date _____ Time _____ Number of players _____

1. Regular games sales	\$ _____	9. Regular games payout	\$ _____	16. Rentals	\$ _____
2. Special games sales	\$ _____	10. Special games payout	\$ _____	17. Supplies/equip.	\$ _____
3. 50/50 Bingo games sales	\$ _____	11. 50/50 Bingo games payout	\$ _____	18. Comp. Workers	\$ _____
4. Multicolor games sales	\$ _____	12. Multicolor games payout	\$ _____	19. Total expenses	\$ _____
5. Progressive games sales	\$ _____	13. Progressive jackpot/cons.	\$ _____		
6. Predraw games sales	\$ _____	14. Predraw payout	\$ _____		
7. Electronic hand-held sales	\$ _____				
Adm. cards	\$ _____				
8. Total sales	\$ _____	15. Total payout	\$ _____	20. Net proceeds	\$ _____

Occasion 3 Date _____ Time _____ Number of players _____

1. Regular games sales	\$ _____	9. Regular games payout	\$ _____	16. Rentals	\$ _____
2. Special games sales	\$ _____	10. Special games payout	\$ _____	17. Supplies/equip.	\$ _____
3. 50/50 Bingo games sales	\$ _____	11. 50/50 Bingo games payout	\$ _____	18. Comp. Workers	\$ _____
4. Multicolor games sales	\$ _____	12. Multicolor games payout	\$ _____	19. Total expenses	\$ _____
5. Progressive games sales	\$ _____	13. Progressive jackpot/cons.	\$ _____		
6. Predraw games sales	\$ _____	14. Predraw payout	\$ _____		
7. Electronic hand-held sales	\$ _____				
Adm. cards	\$ _____				
8. Total sales	\$ _____	15. Total payout	\$ _____	20. Net proceeds	\$ _____

Utilization of Net Proceeds

Date	Description	Check number	Amount

Bank

Name	Address where balance is deposited	Account number

Person Responsible for Use of Proceeds

Name	Address	Telephone number <small>(include area code)</small>

I certify that all of the statements on this report of operations are true, accurate and complete. I am aware that if any of the foregoing statements are willfully false, I am subject to punishment. Facts stated on this report are regarded as if made under oath.

N.J.S.A. 5:8-37 “It shall be the duty of each licensee to maintain and keep such books and records as may be necessary to substantiate the particulars of each such report.”

I certify that I have reviewed this report and that the information on this report of operations is true, accurate and complete. I am aware that if any of the foregoing statements are willfully false, I am subject to punishment.

*I **certify** by placing a check in this box, that I have reviewed the report and that the information provided is true, accurate and complete.*

You must state your name and title below. Reports that are not properly certified will be sent or e-mailed back.

Name and title of officer (please print)

Signature of officer

Sworn and subscribed to before me this _____
day of _____, _____
Month Year

Name of Notary Public (please print)

Signature of Notary Public

