



This report is to be submitted within 2 weeks of the end of each quarter (select quarter):

January-March	April-June	July-September	October-December	Permit Number

Name of Organization	
Address (No. and Street, City or Town, State, Zip Code)	
Telephone	
Email address	

Session Number	#1	#2	#3	#4	#5	#6	#7
Session Date							
Total Receipts ¹							
Value of Prizes (cash & merch.) ²							
Check if grand prize won							

Sub-total A	
	↑ Add #1 thru #7
	↑ Add #1 thru #7

Line 1
Line 2

Session Number	#8	#9	#10	#11	#12	#13	#14
Session Date							
Total Receipts ¹							
Value of Prizes (cash & merch.) ²							
Check if grand prize won							

Sub-total B	
	↑ Add #8 thru #14
	↑ Add #8 thru #14

Line 3
Line 4

Note: If a session is not held, please enter "0" in "Total Receipts" for that Session Date.

¹ - Taken from "Ten Day Bingo Report" Schedule 3, Line 1

² - Taken from "Ten Day Bingo Report" Schedule 3, Line 2 + Line 3

Total	
	Total Receipts: Line 1 + Line 3
	Value of Cash & Prizes: Line 2 + Line 4

Line 5
Line 6

Submitted By	
Date	

	Net Receipts: Line 6 deducted from Line 5
	Amount Due to "Wallingford Police Department": Multiply Line 7 by 0.05

Line 7
Line 8