



Year End Report to Municipality
 Charity Utilization of OLG Charitable Gaming Proceeds
Completed Forms to be Submitted to Kathleen Chafe – City of Cambridge

Charitable Organization Name:			
Address Line 1:			
Address Line 2:			
Charitable Gaming Centre Supported:	Cambridge Bingo and Charitable Gaming Centre		
Charitable Gaming Centre Address:	255 Elgin St N., Cambridge ON N1R 7G4		
Reporting Period:	Jan 01 2020	to	Dec 31 2020

Year End Reports are Due By June 30th, 2021 - Organizations that do not submit their Year End Report by June 30th will be subject to repercussions as listed in the Non-Compliance and Repercussions Document

(A) Previous Period Closing Balance from Previous Year End Report	\$	
(B) Total Revenue Received – Totals Reported on your Monthly Reports (Jan to Dec)	\$	
(C) Total Administrative Expenses – Totals Reported on your Monthly Reports (Jan to Dec)	\$	
(D) Total Use of Proceeds – Totals Reported on your Monthly Reports (Jan to Dec)	\$	
(E) Closing Balance as of this Report (A) + (B) – (C) – (D)	\$	

If your organization conducted other types of Lotteries (Raffles, Break-Open Tickets) during the fiscal year, you are required to complete the Long Form Report to report on the financials from those events. This report form is only to be used for the funds received from cGaming (Charitable Gaming) at the Cambridge Bingo and Gaming Centre.

Supporting Documentation – No Supporting documentation is required to be attached to the Year End Report. All your supporting documentation should have been included with your Monthly Reports. If documentation is required, you will be contacted directly by the Licensing Officer at the City of Cambridge.

Designated Bona Fide Member/Signing Officer Acknowledgement:

We, as the signing officers of the above organization, certify that the above information is full and correct and that our organization has fulfilled its bona fide member obligations to the Charitable Gaming Centre Association operating at the premises listed above.

First Designated Bona Fide Member or Signing Officer		Second Designated Bona Fide Member or Signing Officer
	Signature	
	Print Name in Full	
	Position	
	Business Telephone Number	
	Email Address	
	Date of Signing	