



Parish Attorney/Gaming Enforcement
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RAFFLE REPORT

NAME OF ORGANIZATION: _____

PERMIT NUMBER: _____

DATE OF RAFFLE: _____

NUMBER OF TICKETS SOLD	PRICE PER TICKET	AMOUNT COLLECTED	NUMBER OF UNSOLD TICKETS
_____	\$ _____	\$ _____	_____
PRIZES (CASH AND/OR COST OF MERCHANDISE)			\$ _____
EXPENSES			\$ _____
(LIST BY CHECK NUMBER ON SEPARATE PAGE)			\$ _____
NET PROCEEDS			\$ _____

DESCRIPTION OF PRIZES	PRICE/VALUE	CHECK NO./DONATED BY	NAME OF WINNER
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SIGNATURE OF DESIGNATED OPERATOR

DATE

