



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 Raffle Report of Operations

Pursuant to N.J.A.C. 13:47-9.1, licensees must file a report of operations with the Legalized Games of Chance Control 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 must download this report and complete ALL of the entries for each occasion(s) relating to the conduct of all raffles, except for instant raffle games and carnival games and wheels. Once completed, a member/officer must 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 that person must complete the information on page 3 and have the report notarized.

The Raffle Report of Operations for the conduct of off-premises 50/50 or merchandise raffles is to be accompanied with a sample ticket. Reports are to be mailed to Legalized Games of Chance Control Commission, P.O. Box 46000, Newark, New Jersey 07101, or emailed to 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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Raffle 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 _____ Type of raffle _____
 1. Number of tickets sold _____ 4. Cost of prizes \$ _____ Type of prize(s) _____
 2. Ticket price \$ _____ 5. Supplies/Equipment cost \$ _____
 3. Gross receipts \$ _____ 6. Other expenses \$ _____
 7. Total expenses \$ _____ 8. Net proceeds \$ _____

Occasion 2 Date _____ Time _____ Type of raffle _____
 1. Number of tickets sold _____ 4. Cost of prizes \$ _____ Type of prize(s) _____
 2. Ticket price \$ _____ 5. Supplies/Equipment cost \$ _____
 3. Gross receipts \$ _____ 6. Other expenses \$ _____
 7. Total expenses \$ _____ 8. Net proceeds \$ _____

Occasion 3 Date _____ Time _____ Type of raffle _____
 1. Number of tickets sold _____ 4. Cost of prizes \$ _____ Type of prize(s) _____
 2. Ticket price \$ _____ 5. Supplies/Equipment cost \$ _____
 3. Gross receipts \$ _____ 6. Other expenses \$ _____
 7. Total expenses \$ _____ 8. Net proceeds \$ _____

Occasion 4 Date _____ Time _____ Type of raffle _____
 1. Number of tickets sold _____ 4. Cost of prizes \$ _____ Type of prize(s) _____
 2. Ticket price \$ _____ 5. Supplies/Equipment cost \$ _____
 3. Gross receipts \$ _____ 6. Other expenses \$ _____
 7. Total expenses \$ _____ 8. Net proceeds \$ _____

