



## MUNICIPALITY OF HARRISON PARK

*Head Office:*  
Box 190  
43 Gateway Street  
Onanole, MB R0J 1N0  
Phone: 204-848-7614  
Fax: 204-848-2082

*Satellite Office:*  
Box 220  
108 Main Street  
Newdale, MB R0J 1J0  
Phone: 204-849-2107  
Fax: 204-849-2190

### RAFFLE FINANCIAL STATEMENT FORM

Issued under the authority of the Provincial Auditor, Province of Manitoba

Financial statement submitted by the Licensee to the Licensing Municipal Governments as required by Section 09 of the Regulations pertaining to Lotteries Licensed by Municipal Governments.

**\*\*MUST PROVIDE COPY OF TICKET FROM DRAW WHEN SUBMITTING FINANCIAL STATEMENT\*\***

\_\_\_\_\_  
(Name of Licensee) License Number \_\_\_\_\_

Date License Issued \_\_\_\_\_ Date or Period of Raffle \_\_\_\_\_

(In cases of on-going undertakings, financial statements must be submitted at the end of each calendar year.)

#### STATEMENT SHOWING ACCOUNTING FOR FUNDS

Gross Receipts (indicate particulars of raffle) \$ \_\_\_\_\_

Less: Administrative expenses, itemized by kinds of expenses, such as printing. Advertising, etc. \$ \_\_\_\_\_

+ \$ = \$ \_\_\_\_\_

Cost of prizes awarded, give particulars  
(Please supply list of winners & prizes)

\$ \_\_\_\_\_

Net Receipts

Net receipts were distributed as follows:

Name of Organization:

Date Payment was Made:

Amount:

\_\_\_\_\_ \$ \_\_\_\_\_

#### STATEMENT SHOWING ACCOUNTING FOR TICKETS

Number of tickets printed: \_\_\_\_\_

Less: Number of unsold tickets on hand: \_\_\_\_\_

Number of tickets not returned: \_\_\_\_\_

Number of tickets sold: \_\_\_\_\_

I certify that the foregoing is a true and correct statement accounting for the funds of the lottery scheme licensed by the R.M. of Park under the above license number.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Treasurer

Dated at Onanole, Manitoba, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Please return to: Municipality of Harrison Park—Information Officer  
43 Gateway St., Box 190, Onanole, MB., R0J 1N0 (204-848-7614)