

DOJ USE ONLY
Fee Paid:

OREGON DEPARTMENT OF JUSTICE Raffle License Annual Report

DOJ USE ONLY
Date Received:

This report must be filed no later than 60 days after the end of the license year.

Licensee
Licensee: _____ License #: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Is this a new address? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, date of change: _____

Reporting Period
1 This report is for the period from _____ to _____
2 Did the expiration date of your license change during the reporting period? <input type="checkbox"/> Yes <input type="checkbox"/> No
3 Number of RAFFLES held during the reporting period: _____

Raffle Activity Summary				
Date of Raffle (A)	Total Sales (B)	Total Expenses (C) (other than prizes)	Total Cash Prizes Awarded (D)	Total Cost of Non- Cash Prizes (E)
4	Add all columns and enter totals:	\$	\$	\$

5	Enter Total Raffle Sales [from page 1, line 4(B)]:	\$
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Raffle Report Fee		
6	FEE ON TOTAL SALES Multiply line 5 .005:	\$
7	DELINQUENCY FEE: If this report is not filed within 60 days of the end of the license year, or the fee does not accompany the report, add a delinquency fee of \$20 or 1% of the amount on line 6 [.01 line 6], whichever is greater.	\$
8	TOTAL FEES DUE. Line 6 plus line 7. Enter result here. Send this amount with the report to DOJ.	\$

Raffle Expenses List ALL nonprize expenses related to raffle. Do NOT include fees paid to DOJ.		
9	a) Printing:	\$
	b) Advertising/Promotions:	\$
	c) Rental (Equipment/Property)	\$
	d) Other (specify):	\$
		\$
		\$
	e) Total Expenses (total of lines a through d) <i>This total must equal the amount shown on page 1 at Column C.</i>	\$
10	RAFFLE EXPENSE PERCENTAGE. Divide line 9e by line 5: [Do NOT Round – i.e., 18.8%]	%
11	Did one or more corporate sponsors help to offset your raffle expenses? <input type="checkbox"/> Yes <input type="checkbox"/> No (This help could have been in the form of donated money/services or direct payment of raffle expenses.)	

Report Certification
<p>TO BE COMPLETED BY A RESPONSIBLE OFFICIAL OF THE ORGANIZATION:</p> <p>I certify that I am a responsible official of the organization, and that I have personally reviewed the information contained in this report. I further certify that the information contained in this report is true and correct to the best of my knowledge.</p> <p>Print name of Official: _____</p> <p>Signature: _____ Date: _____</p>

**Keep a copy of this report for your records. Mail the completed report, together with the report fee, to:
Oregon Department of Justice, 1515 SW Fifth Avenue, Suite 410, Portland, OR 97201 (503) 229-5725**