

Local Gaming Authority Financial Report

Organization #

5395

| PLEASE PRINT | | | | | | | |
|--|---|-------|-----------|--|--|--|--|
| Name of Licensing Authority The Town of Sway River | | | | | | | |
| Address | ROLIZO | | | | | | |
| Report for the Year | 2021 | | | | | | |
| Licence Fees collected | 125.00 | | | | | | |
| Number of licences iss | <u> </u> | 25 | | | | | |
| How many of these licences earned more than \$10,000.00? | | | | | | | |
| Summary Information f | or the raffles that earned more than \$10,000.00: | | | | | | |
| | GROSS REVENUE | 1. \$ | 14,205.00 | | | | |
| | PRIZES AWARDED | 2. \$ | 1,000.00 | | | | |
| | EXPENSES ASSOCIATED WITH RAFFLE | 3. \$ | 329.28 | | | | |
| | NET PROCEEDS (LOSS) (Line 1 - 2 - 3) | 4.\$ | 12,875.72 | | | | |

INFORMATION REGARDING THE DISTRIBUTION OF NET PROCEEDS (LINE 4) is recorded on Page 2

THIS REPORT MUST BE PUBLISHED AND MADE AVAILABLE TO THE COMMUNITY IT MUST BE SUBMITTED TO THE LGA WITHIN 90 DAYS OF YOUR YEAR END

| re | venues in excess of \$10,0 | 00.00 | | | | |
|--------|---|---|-----------------------------|-------------------------------|---------------------|-------------|
| LICEN | SED ORGANIZATION | DESCRIP | TION (WHERE TH | E NET PROCEEDS W | ERE SPENT) | \$ AMOUN |
| Swan V | alley Cheetahs Gymnastics | New equi | ipment and a new | V heating (cooling sy | istem folgym | 12,875. |
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| | pace is required to list additional disbunany extra pages as necessary. | 000000000000000000000000000000000000000 | | | • | \$ 12,875 |
| | Note:Instead of filling out Local Gaming Authority R See the LGA website to obtain a co | affle Financia | l Reports for raffle | es generating more | than \$10,000 | in revenue. |
| | I, the undersigned, have examin | CER ned the records a | TIFICATION and accounts of; | The Town of (Name of Licens | Swey River | |
| | with respect to the above descr knowledge and belief. | | (| | | of my |
| | DATED | THIS 27 NO | day of /V/dra | <u>ch</u> , 20 22 | <u>-</u> | |
| | | ignature int Name | Jerry Chil | da, CPA CGA | | |
| | P | fice Held Address stal Code | Chief Fina PO Box 879 | ncial Officer Swan River M | B | |
| | | Email elephone | 204-734- | sr.ca 1586 ext 203 | | |
| | Please enter the name and o | laytime telepho | one number of the pe | erson completing this | report if it is dif | fferent |
| | from that shown above. | Name: Email: | F- | Phone: | | |