**QUARTERLY SUMMARY STATEMENT OF BINGO OPERATIONS**

**INSTRUCTIONS:** Prepare report in triplicate. Within **15 days** after the end of each calendar quarter, send original to New York State Racing and Wagering Board, one copy to clerk of municipality, and retain one copy for your files.

<table>
<thead>
<tr>
<th>BC -</th>
<th>-</th>
<th>-</th>
<th>-</th>
<th>License Number</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>License Number</th>
<th>N.Y.S. Identification Number</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Organization</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City</th>
<th>Zip</th>
<th>County</th>
</tr>
</thead>
</table>

**Address Where Bingo Played if Different:**

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City</th>
<th>Zip</th>
<th>County</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>For Quarter:</th>
<th>Jan 1 - Mar 31</th>
<th>Apr 1 - Jun 30</th>
<th>Jul 1 - Sep 30</th>
<th>Oct 1 - Dec 31</th>
<th>Year 20</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Total Number of Occasions</th>
<th>Total Number of Players</th>
</tr>
</thead>
</table>

**A. RECEIPTS - (Part "A" of Form BC-7)**

1. Total Bingo Receipts

2. Total Sale of Supplies

3. Total Other Receipts (Rent, etc)

4. Total Receipts (Add items 1 through 3)

**B. EXPENDITURES - (Part "B" of Form BC-7)**

1. Total Prizes

2. Total Rent (If Applicable)

3. Total License Fee

4. Total Bingo Equipment

5. Total Services

6. Total Other Expenses

7. Total Expenditures (Add Items 1 through 6)

**C. NET PROFIT OR (LOSS)**

1. Total Profit or (Loss) Before Additional License Fee (Item 4 Part A less Item 7 Part B)

2. Total additional license fee

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**NYS RACING & WAGERING BOARD**
1 Broadway Center, Suite 600
Schenectady, NY 12305-2553
Telephone (518) 395-5400  Fax (518) 347-1469
www.racing.state.ny.us

**For Quarter:** [ ] Jan 1 - Mar 31 [ ] Apr 1 - Jun 30 [ ] Jul 1 - Sep 30 [ ] Oct 1 - Dec 31 **Year 20**

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**BC-7Q (Rev. 3/06)**
Page 1 of 2
D. DISPOSITION OF AND ACCOUNTING FOR NET PROCEEDS

1. Unexpended balance of net proceeds shown on last BC-7Q report (Item F of BC-7Q).................................

2. Net Profit or (Loss) from this period (Part C, Item 3).................................................................

3. Interest earned on net proceeds on deposit in interest bearing account(s)..............................................

4. Other deposits into or adjustments in Special Bingo Account (If Applicable)........................................

Explanation

5. Total net proceeds (add Items 1 through 4)..................................................................................

E. Total disbursements of net proceeds from special bingo account since last BC-7Q report (same as Item H)..........................................................................................

F. UNEXPENDED BALANCE OF NET PROCEEDS (ITEM D5 LESS ITEM E)...................................

G. Attach a list of all disbursement checks of net proceeds drawn on special bingo checking account, other than those included in Part "B" (Expenditures), since last BC-7Q report.

H. Total Amount of Checks (Must be the same as Item E).................................................................

Instructions: This section must be fully completed by all parties.

I swear, or affirm that the information and statements contained herein have been examined by me and to the best of my knowledge and belief are true, correct and complete.

Head of Organization:

First Name

Last Name

Phone Number

Member in Charge:

First Name

Last Name

Preparer (if different):

First Name

Last Name

Preparer (if different):

First Name

Last Name