

**Certification of  
Non-Permit Holder**



**Form 303**  
Supplier Use Only

**VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES  
OFFICE OF CHARITABLE AND REGULATORY PROGRAMS**

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

Officer or Game Manager \_\_\_\_\_

**I hereby certify that the above referenced organization's gross receipts are expected to be \$25,000 or less in any 12-month period .**

*Must be signed by either an Officer of the organization or the organization's game manager.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Full Name \_\_\_\_\_

Title: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Supplier Name: \_\_\_\_\_

***This form must be dated and kept on file by the supplier for three years from the end of a fiscal year.***

**This statement is prepared and signed to document the sale of gaming supplies as required by the Commonwealth of Virginia § 18.340.23.A of the Code of Virginia, 1950, as amended and the Charitable Gaming Rules and Regulations - 11 VAC 15-31-20.C.1.**