

**DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
OFFICE OF CHARITABLE GAMING
RAFFLE/TREASURE CHEST SALES RECONCILIATION FORM - BINGO SESSION**

ORGANIZATION: _____ **SESSION DATE:** _____

1. Beginning Raffle Ticket Number		_____	
2. Next Raffle Ticket Number on Hand		_____	
3. Number of Tickets Sold	(Line 2 minus line 1)	_____	
4. Sales Price Per Ticket		_____	
5. Gross Receipts	(Line 3 x 4)	_____	Carry this figure to Form 103, Line 6
6. Cash Prizes Paid Out		_____	
7. Total Cash to Account For	(Line 5 minus line 6)	_____	
8. Ending Cash on Hand		_____	
9. Overage/(Shortage)	(Line 7 minus line 8) <i>Shortage figure if Line 7 is greater than Line 8</i> <i>Overage figure if Line 8 is greater than Line 7</i>	_____	
10. Prizes Paid Out by Check		_____	
11. Total Prizes Paid by Cash or Check	(Add lines 6 + 10)	_____	Carry this figure to Form 103, Line 15
12. List All Merchandise Awarded as Prizes:	_____		

I certify this form is complete and accurate to the best of my knowledge

Signature of Cashier: _____ Date: _____

Use a separate raffle form (Form 104-D) for each raffle. If multiple forms are used for the same session, than all forms must be combined before entering the totals on the appropriate lines of the session reconciliation summary (Form 103).

Information Entries:	Begin Balance	Additions	Payouts	Carry Over Balance
Treasure Chest	_____	_____	_____	_____
Raffle	_____	_____	_____	_____
Raffle	_____	_____	_____	_____

** The use of handwritten documentation during the bingo session that would assist in the completion of this form will need to be kept as part of the organization's gaming records**