ALCOHOL LAW ENFORCEMENT DIVISION **BINGO SECTION** 4233 Mail Service Center RALEIGH, NORTH CAROLINA 27699

•BL-2 ANNUAL AUDIT REPORT OF BINGO •

CALENDAR YEAR 20

If your Exempt Organization was inactive for the entire calendar year, INDICATE with a ZERO and return to the Bingo Section				
NAME OF EXEMPT ORGANIZATION:				
LOCATION WHERE BINGO GAMES WERE				
CONDUCTED:				
BINGO LICENSE NUMBER:		TAX IDENTIFICATION NUMBER:		
		WEEKDAY BINGO WAS CONDUCTED:		
TOTAL BINGO SESSIONS:		TIME OF BINGO SESSIONS:	until	
SEPARATE BANK ACCOUNT INFORMATION:				
(Name of Bank)		(Bank Account Number)		

INSTRUCTIONS: This audit report of the bingo separate bank account must be completed by the licensee in the manner prescribed and submitted to the Alcohol Law Enforcement Division and your local law enforcement agency no later than January 31 covering bingo activity for the preceding calendar year. All reports from which the licensee determines the totals entered for the audit period must accompany this report. Failure to complete this report in the manner prescribed may result in a licensee being charged with a violation of G.S. 14-309.5. Upon conviction, such person shall not conduct a bingo game for a period of one year.

		Column A: Allowable Expenses (do not change listed categories)		Column B: Allowable Disbursements (do not change listed categories)	
		Rent		Donations to Charitable Causes	
Beginning Account Balance		Taxes		Donations to Religious Groups	
Year Total of Gross Receipts		Prizes		Donations to Civic Groups	
Year Total of Bank Interest		Utilities		Donations to Scientific Group	
ADD THE ABOVE_TOGETHER SUB TOTAL	-	Supplies		Donations for Testing	
Total Amounts from Column A & B	-	Comp. Pay (1 member @1.5 times minimum wage)		Donations to Public Safety	
Ending Balance Subtract Column A &		Licensee Fee		Donations to Education/Literacy	
B from Sub Total	-	Advertising		Donations to Animal Cruelty Prev.	
		Bank Charges		Donations to Amateur Sports	
		Total: (Allowable Expenses)	\$-	Donations to Child Cruelty Prev.	
				Donations for Capital Improvements (purchasing, constructing, maintaining or operating expenses of the Exempt Organization)	
				(Allowable Disbursements)	\$ -

CERTIFICATE

I certify all of the information in this Annual Audit Report of Bingo, is true and accurate, to the best of my knowledge and belief.

Signature of Exempt Organization Member present and responsible for this Annual Audit Report of Bingo.

Date:

Contact Person for Annual Audit:

IMPORTANT: Daytime Telephone Number

This Annual Audit Report of Bingo must be completed in this entirety and submitted as required under G.S. 14-309.11

