

**Town of Putnam**

**QUARTERLY BINGO SUMMARY WORKSHEET**

Rev. 1/1/18

Email:

Submit and pay by check at: Revenue Collection Office

This report is to be submitted online within 2 weeks of the end of each quarter (select quarter):

January-March	April-June	July-September	October-December	Permit Number

Name of Organization	
Address (No. and Street, City or Town, State, Zip Code)	
Telephone	
Email address	

Session Number	#1	#2	#3	#4	#5	#6	#7
Session Date							
Total Receipts <sup>1</sup>							
Value of Prizes (cash & merch.) <sup>2</sup>							
Check if grand prize won							

→ Add #1 thru #7 

Sub-total A

 Line 1  
 → Add #1 thru #7 

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 Line 2

Session Number	#8	#9	#10	#11	#12	#13	#14
Session Date							
Total Receipts <sup>1</sup>							
Value of Prizes (cash & merch.) <sup>2</sup>							
Check if grand prize won							

→ Add #8 thru #14 

Sub-total B

 Line 3  
 → Add #8 thru #14 

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 Line 4

Note: If a session is not held, please enter "0" in "Total Receipts" for that Session Date.

<sup>1</sup> - Taken from "Ten Day Bingo Report" Schedule 3, Line 1

<sup>2</sup> - Taken from "Ten Day Bingo Report" Schedule 3, Line 2 + Line 3

**Total Receipts:** Line 1 + Line 3 

Total

 Line 5  
**Value of Cash & Prizes:** Line 2 + Line 4 

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 Line 6

Submitted By	
Date	

**Net Receipts:** Line 6 deducted from Line 5 

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 Line 7

**Amount Due to "Treasurer of State of CT":** Multiply Line 7 by 0.05 

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 Line 8