



SPECIFIED RECIPIENT ANNUAL LOCAL DEVELOPMENT AGREEMENT REPORT

State Form 54927 (2-12)
Approved by State Board of Accounts, 2012
INDIANA GAMING COMMISSION
Pursuant to IC 4-33-23

I. Report Information

Specified recipient submitting this report	Legal name of person submitting this report	Date submitted (<i>month, day, year</i>)
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II. Total Amounts

Total amount of economic development payments received from development providers during report period:

Total amount of disbursement of economic development payment money that specified recipient made during report period:

III. Details of Each Economic Development Payment Received

(Attach additional sheets if necessary.)

Date of payment received (<i>month, day, year</i>)	Name of Development Provider	Amount of Payment

IV. Details of Each Disbursement Made

(Attach additional sheets if necessary.)

Name of Recipient	Address (<i>number and street, city, state, ZIP code</i>)	Telephone Number	Date (<i>month, day, year</i>)	Party, Specified Recipient or Neither	Project Title	Specific Purpose of Disbursement	Payment Amount (<i>total must equal item II</i>)
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V. Statement of Accuracy

Under penalties of perjury, I declare that I am an officer of the organization listed in section 1, and that I have examined this report and any accompanying documentation and to the best of my knowledge and belief, it is true, correct, and complete.

Signature

Print name

Title

Date (*month, day, year*)