

For office use only	
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Reviewed by:	
Date reviewed:	

1. Organization's legal name				2.	2. Doing Business As (DBA)						
3. Federal Identification Number (FID/EIN)			4.	4. Charity Gaming (CG) license number							
5. Address of principal office (number and street required)			6. City	6. City		7. Sta	7. State		ZIP Code	9. County	
10. Mailing address (if different)			11. Ci	11. City		12. State		13	. ZIP Code	14. County	
15. Organization daytime telephone number ( ) ( ) ( )		ber				17. Organization email address					
18. Contact person's name 19. Contact ( )		person's telephone number				20. Contact person's email address					
21. Name of retail establishment				22. Addr	. Address of retail establishment (number and street)						
23. City		24. State	e 25	. ZIP Code	P Code 26. County		unty	27. Retail establishment telephone num			elephone number
28. Name of General Manager	29. General N	Manager's telephone 30. General Manager's			's ema	aail address 31. Ticket numbers assigned to this establishment					
Legal name of employee who sold tickets  Telephone number of			of employ	ee			Email address of employee				
Legal name of employee who sold tickets  Telephone num  ( )		number	ber of employee			Email address of employee					
Legal name of employee who sold tickets  Telephone num  ( )		number	of employe	mployee Email address of employee							
Legal name of employee who sold tickets  Telephone no  ( )		number of employee				Email address of employee					
Legal name of employee who sold tickets  Telephone ( )		number of employee				Email address of employee					
Legal name of employee who sold tickets  Telephone number  ( )		number	of employe	mployee Email address of employee							
Legal name of employee who sold tickets  Telephone number of em  ( )		of employe	ee			Email address of employee					
Legal name of employee who so	ployee who sold tickets  Telephone number of employee  ( )				Email address of employee						
Certification: We certify under understand that providing false i status, a civil penalty, or other sa	nformation ma	y lead to the re	evocatio	n of or den	ial o	f charital	ble gar	ning lice	nse(		
Signature of Presiding Officer			Signa	Signature of Secretary							
Printed name and title			Print	Printed name							
Date (month, day, year)	Daytime tele	ephone number Date (		(mo	nth, day,	ay, year)		Daytime telephone number			

Organization legal name	Federal Identification Number (FID/EIN)	Charity Gaming (CG) license number
Legal name of employee who sold tickets	Telephone number of employee  ( )	Email address of employee
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Legal name of employee who sold tickets	Telephone number of employee  ( )	Email address of employee
Legal name of employee who sold tickets	Telephone number of employee  ( )	Email address of employee
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Legal name of employee who sold tickets	Telephone number of employee  ( )	Email address of employee

## **CG-VTA Instructions**

An organization who obtains a single activity or festival activity and utilizes Volunteer Ticket Agents (VTAs) is required to file this form with their Single License Financial Report (CG-SL FR) within ten (10) days of the end of the activity. A separate form (CG-VTA) is required for each retail establishment utilized to sell tickets or entries.

Before using VTAs to sell tickets/entries to an allowable event, a qualified organization must provide a list containing the name, address and telephone number of each retail establishment whose employees will serve as volunteer ticket agents and the name of the general manager of each establishment.

After tickets/entries to the allowable event are sold, the qualified organization must provide to the commission the name, address and telephone number of each employee who served as a volunteer ticket agent.

In box 31, list the starting and ending sequential numbers of the tickets sold by each specific retail establishment.