



CANNON BUILDING  
861 SILVER LAKE BLVD., SUITE 203  
DOVER, DELAWARE 19904-2467

STATE OF DELAWARE  
DEPARTMENT OF STATE  
DIVISION OF PROFESSIONAL REGULATION

TELEPHONE: (302) 744-4500  
FAX: (302) 739-2711  
WEBSITE: WWW.DPR.DELAWARE.GOV

**CHARITABLE GAMBLING  
DELAWARE GAMING CONTROL COMMISSION  
AFTER OCCASION REPORT**

**REPORT DUE WITHIN FIFTEEN (15) DAYS**

1. Name of Licensee: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. License Number: \_\_\_\_\_
4. Name of District: \_\_\_\_\_
5. Place where played: \_\_\_\_\_
6. Date of Occasion: \_\_\_\_\_
7. Hours of play: \_\_\_\_\_
8. Number of games played: \_\_\_\_\_
9. Number of players: \_\_\_\_\_
10. Total gross receipts:
 

(a) Receipts from admission	\$ _____
(b) Receipts/special games	\$ _____
(c) Other receipts (attach)	\$ _____
<b>TOTAL \$ _____</b>	
11. Total expenses:
 

(a) Amount or cost of prizes	\$ _____
(b) Bookkeepers	\$ _____
(c) Equipment rental	\$ _____
(d) Rental of premises	\$ _____
(e) Other (detail)	\$ _____
<b>TOTAL \$ _____</b>	
12. Name and address of member in charge:
   
\_\_\_\_\_
   
\_\_\_\_\_
   
\_\_\_\_\_
   
\_\_\_\_\_
13. Purposes for which net proceeds to be utilized:
   
\_\_\_\_\_
   
\_\_\_\_\_
   
\_\_\_\_\_

\_\_\_\_\_  
Officer of Licensee

**Return to: Delaware Gaming Control  
861 Silver Lake Blvd  
Cannon Bldg., Suite 203  
Dover, DE 19904**

\_\_\_\_\_  
Telephone Number