



**GAMBLING CONTROL UNIT
BEANO/BINGO
WINNER TAKE ALL ROUND REPORT
MGCU - 5700**

Organization Name: _____ **Organization Number:** _____

Registration Number: _____

Date of Game: ___/___/___ - S M T W TH F SA:

Total Receipts: \$ _____

| | |
|--------------------------------|--------------------------------|
| Check # _____ Amount: \$ _____ | Check # _____ Amount: \$ _____ |
| Check # _____ Amount: \$ _____ | Check # _____ Amount: \$ _____ |
| Check # _____ Amount: \$ _____ | Check # _____ Amount: \$ _____ |
| Check # _____ Amount: \$ _____ | Check # _____ Amount: \$ _____ |
| Check # _____ Amount: \$ _____ | Check # _____ Amount: \$ _____ |

Total of Prizes: \$ _____

Date of Game: ___/___/___ - S M T W TH F SA:

Total Receipts: \$ _____

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| Check # _____ Amount: \$ _____ | Check # _____ Amount: \$ _____ |
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| Check # _____ Amount: \$ _____ | Check # _____ Amount: \$ _____ |

Total of Prizes: \$ _____

Date of Game: ___/___/___ - S M T W TH F SA:

Total Receipts: \$ _____

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Total of Prizes: \$ _____

Date of Game: ___/___/___ - **S M T W TH F SA:**

Total Receipts: \$ _____

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Date of Game: ___/___/___ - **S M T W TH F SA:**

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Check # _____ Amount: \$ _____

Check # _____ Amount: \$ _____

Total of Prizes: \$ _____

Date of Game: ___/___/___ - **S M T W TH F SA:**

Total Receipts: \$ _____

Check # _____ Amount: \$ _____

Check # _____ Amount: \$ _____

Check # _____ Amount: \$ _____

Check # _____ Amount: \$ _____

Check # _____ Amount: \$ _____

Check # _____ Amount: \$ _____

Check # _____ Amount: \$ _____

Check # _____ Amount: \$ _____

Check # _____ Amount: \$ _____

Check # _____ Amount: \$ _____

Total of Prizes: \$ _____

Grand Total of Receipts: \$ _____

Grand Total of Prizes: \$ _____

Note: Grand Total of Receipts Must Equal Grand Total of Prizes

ATTACH THIS FORM TO THE DISPOSITION OF FUNDS REPORT