

Local Gaming Authority Financial Report

Organization # 5395

PLEASE PRINT			
Name of Licensing Authority	The Town of Swan River		
Address PO Box 879,	Swan River MB ROL 120		
Report for the Year	2019		
er en			
Licence Fees collected:		\$	400.00
Number of licences issue	d during the year?		80
How many of these licence	es earned more than \$10,000.00?	_	4
Summary Information for	the raffles that earned more than \$10,000.00:		
	GROSS REVENUE	1. \$	46,600.00
	PRIZES AWARDED	2. \$	9,060.00
	EXPENSES ASSOCIATED WITH RAFFLE	3. \$	1,651.24
	NET PROCEEDS (LOSS) (Line 1 - 2 - 3)	4. \$	35,888-76

INFORMATION REGARDING THE DISTRIBUTION OF NET PROCEEDS (LINE 4) is recorded on Page 2

THIS REPORT MUST BE PUBLISHED AND MADE AVAILABLE TO THE COMMUNITY IT MUST BE SUBMITTED TO THE LGA WITHIN 90 DAYS OF YOUR YEAR END

revenues in excess of \$10,00	0.00	
LICENSED ORGANIZATION	DESCRIPTION (WHERE THE NET PROCEEDS WERE SPENT)	\$ AMOUNT
Swan Kiver Valley Agricultural Society	North West Roundup and Exhibition and Fair Grounds	4.682.5
Swan Valley Cheetalls Lymmstics (1)t	bymnastics equipment and spring floor purchases	10,031.20
Swan Valley Stampeders Tunior A Hockey	Junior A Hockey team trade tees, buschnoter and equipment	9 360.00
Packland Rangois Midget AAA Team	Midget AAA Gockey team bus service	11,815-00
, ,		
If further space is required to list additional disburs	sements of net proceeds please	*
attach as many extra pages as necessary.		\$ 35,888.7
	_	*
	ne above information, you may find it easier to attach a copy of	
	ffle Financial Reports for raffles generating more than \$10,000	
See the LGA website to obtain a copy	of the Local Gaming Authority Raffle Financial Report form at www.LGAmanitoba.c	:a
	CERTIFICATION	
I, the undersigned, have examine	d the records and accounts of; The Town of Swan River	
with respect to the chave describ	(Name of Licensing Authority)	2
knowledge and belief.	ed licensing activities, the information contained herein is correct to the best	of my
	is $124h$ day of May , $20 \ge 0$.	
5/1125 111	duy of 710 , 20 <u>27</u> .	
	nature Jewy Anda	
	t Name Televice Enido, CPA, CGA	
	ce Held Chief Financial Officer	
	dress PO Box 879, 439 Main St	
	al Code ROL 170	
	mail cto Q towns 1. Cd	
I ele	ephone 204-734-4586 ext 6	
Please enter the name and day	ytime telephone number of the person completing this report if it is diff	ferent
	Name: Phone:	 ≥ 3/2000 (22)
	Email:	

Information regarding the distribution of net proceeds from raffle licenses generating gross