

Bingo Daily Session Summary (*)

This form is a template that is not required and should be modified to fit your organization's bingo sessions.

Licensed Name: _____
 License Number: _____ Session Time: _____
 Attendance: _____ Session Date: _____

Type I Traditional Bingo

Income from the session

Type I--Traditional Bingo \$ _____
 Raffles _____
 Supplies Income _____
 Electronic Bingo Aid Rental _____
 Gift Cards/ Promotions _____
 Cookie Jar _____
 Other (please describe): _____

Total Income \$ _____

Expenses paid on the session date only ()**

Traditional Bingo Prizes \$ _____
 Raffle Prizes _____
 Door Prizes _____
 Cookie Jar Prizes _____
 Other (please describe): _____

Total Expenses \$ _____
Total Income Minus Total Expenses (Gross Profit) \$ _____ (A)

Type II Instant Bingo

Gross Profit from the proceeds of the sale of instant bingo: _____ (B)
 Other (Ex: Start Up Cash): \$ _____ (C)
 Total Amount Deposited into bingo checking account:
 Cash _____
 Checks _____
 Credit Cards _____
Total Deposit \$ _____ (D)

Does (D) = (A) + (B) + (C)? If no, please explain:

Concession Income Calculation	
Concession Revenues	\$ _____
Concession Expenses	\$ _____
Net Concessions	\$ _____

* The purposes of this form are to allow for recording of all activity that occurred at a bingo session, and to determine if amounts deposited were correct based upon accurate recording of revenues and expenses. Overall compliance with records to be maintained, as listed in 2915.10, may require your organization to further customize this document.

** Other types of expenses typically include license fees, rent/consideration, advertising, electronic bingo aids, bingo supplies, equipment, security, tables/chairs, audit/accounting services, safes/cash registers, bank fees, property taxes and/or facilities maintenance/operation. While these are expenses you will be required to report on your annual bingo application, they are typically not included above since they're required to be paid from a check drawn on your bingo checking account.

Package Recap

This form is a template that is not required and should be modified to fit your organization's bingo sessions.

Bingo Year: _____

Number of Sessions used: _____

Package Types (explain what is included in each bingo package):

	Bingo Sheets/Bookle ts w/ _____ faces	Bingo Sheets/Bookle ts w/ _____ faces	Bingo Sheets/Bookle ts w/ _____ faces	Electronic Bingo Aids	Other (list item & quantity)	Other (list item & quantity)	Other (list item & quantity)
Package							
1	_____	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____	_____	_____
Free	_____	_____	_____	_____	_____	_____	_____

***Note:** Complete this form for the first session of the year and then for any sessions where the package(s) change.

