

ABERDEEN CITY LICENSING BOARD

GAMBLING ACT 2005

SMALL SOCIETY LOTTERY RETURN

| 1. | Name of Society on behalf of is promoted | f which lottery | | |
|--|---|-----------------|-------|------|
| 2. | Address (including postcode) of office or head office of Society | | | |
| 3. | Name, address and capacity of person applying on behalf of the society. | | | |
| 4. | Dates on which tickets were available for sale or supply | | | |
| 5. | Date of Draw | | | |
| 6. | Value of Prizes (including any donated prizes and any rollover) | | | |
| 7. | Total proceeds of lottery | | | |
| 8. | Amount deducted in respect of prizes | | | |
| 9. | Amount deducted in respect of costs | | | |
| 10. | Provide details of the particular purpose or purposes to which the proceeds of the lottery were applied and the total amount applied for that purpose or each of those purposes. | | | |
| 11. | Were any expenses of the lottery met otherwise than out of proceeds of the lottery? | | Yes 🗌 | No 🗌 |
| 12. | If you have answered "Yes" above, please state the amount of the expenses, and the source of any sums used to meet them (names, addresses and telephone numbers should be provided) | | | |
| Date |) : | | | |
| Signature of person applying on behalf of the society: | | | | |
| We, being two members, of the society who are aged 18 years or over, and appointed in writing by the society or its governing body, in accordance with the letter(s) attached hereto*, certify that the foregoing is a correct return. | | | | |

Please send the return to the Depute Clerk to the Licensing Board, Office of City Solicitor, Resources Management, Aberdeen City Council, Ground Floor, Town House, Broad Street, Aberdeen, AB10 1AQ

The return must be submitted to the Depute Clerk no later than 3 months after the date of the lottery draw.

Any person who fails to send a return in accordance with the provisions of the Gambling Act 2005 Schedule 11 – Part 4 or who knowingly enters false information in the return or certifies the return knowing that it contains false information shall be guilty of an offence.

*Please provide a copy of your letter(s) of appointment.