State of Wisconsin Department of Administration **Division of Gaming** DOG-122 (8/2011)

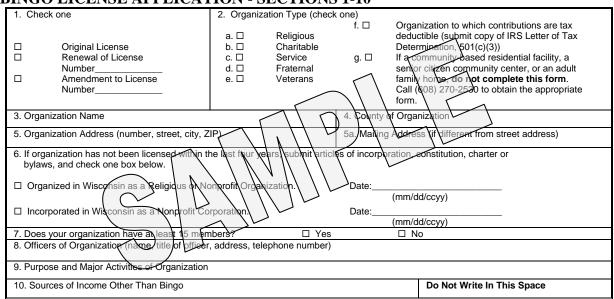


Bingo License – Amendment Information

An organization may amend an approved license <u>within the current license year</u> to add, change, or substitute:

- occasion date(s)
- time(s) of occasion(s)
- type of occasion(s)
- bingo premise
- supervisor(s)
- member designated responsible for gross receipts
- authorized agent
- There is one \$3 processing fee to cover all changes made on each amendment form filed during the licensing year.
- There is an additional \$20 per occasion fee for adding any occasion during the licensing year. (Sections #11 and #12)
- There is an additional \$10 fee if changing the member designated responsible for gross receipts. (Section #14)

THE FOLLOWING ARE STEP-BY-STEP INSTRUCTIONS TO COMPLETE THE AMENDMENT. Please note that the excerpts from the application form are for example only. You must complete a **Bingo License Application to file an amendment.**



BINGO LICENSE APPLICATION - SECTIONS 1-10

Only Sections 1, 3 and 5 on page 1 need to be completed for an amendment:

- 1. Check Amendment to License. Write in your bingo license number.
- 3. Print organization name as it appears on bingo license.
- 5. Print <u>organization's</u> street address. If the **mailing** address is different, indicate this by printing the mailing address in section 5a.

OCCASIONS - SECTION 11 (regular) - 12 (limited)

11. Bingo Occasions – Recurring Occasions – Regular (hard) or Special (paper) Cards	_			
a. Location of Regular Bingo Occasions (Name and Address)	b. Approximate Capacity of Bingo			
	Premise			
c. Name and Address of Owner of Bingo Premise	d. County of Premise			
e. List the Regular Bingo Occasion Dates and Starting Time of Occasions.				
Date Starting Time Date Starting Time	Date Starting Time			
(mm/dd/ccyy) (mm/dd/ccyy) (mm/dd/ccyy)	n/dd/ccyay			
1. 21. 41.				
	11			
12. Limited Period Bingo Occasions - Played once per year for not more than 4 of 5 consecutive days				
a. Location of Limited Period Bingo Occasions (Name and Address)	pproximate Capacity of			
	ingo Premise			
c. Name and Address of Owner of Bingo Premise d. C	ounty of Premise			
e. List the Limited Period Bingo Occasion Dates and Starting Time of Occasions.				
Date Starting Time Date Starting Time	Date Starting Time			
	n/dd/ccyy)			
	n ddiodyy)			
··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··				
If you have more occasions than spaces allow, please photocopy this				
page or attach a separate sheet with just the dates and starting times.				

- 11. Complete sections a-e if *adding, changing, or substituting* regular bingo occasions.
 - If substituting one date for another, make sure it is clear which date is being deleted and which date is being added.
- 12. Complete sections a-e if *adding, changing, or substituting* limited bingo occasions.
 - If substituting one date for another, make sure it is clear which date is being deleted and which date is being added.

This section should also be used to advise of changes in starting times and location of occasions.

If not doing any of the above, leave this section blank.

THERE IS AN ADDITIONAL \$20 FEE FOR EACH OCCASION ADDED (NEW)

<u>NOTE</u>: An organization wishing to substitute an alternate occasion for one that has been canceled must alert the bingo unit by telephone at (608) 270-2530 or (800) 791-6970 and then file an amendment within seven days of the canceled occasion date.

SUPERVISING ME	MBERS - SECTI	ION 13	nE	
13. Supervising Members (Phot	ocopy this page if more su	pervisors than	fdrm allows.)	
Name (Print Clearly)	~ 10		Address humber street, city, state	e,ZIP)
Daytime Telephone Number ()	SM	MUL	Alternate Telephone Number	Date of Birth
	PL-			

- 13. Complete this section if *adding or deleting* supervisors.
 - If *adding* supervisors, Section 13 must be completed and signed by new supervising member.
 - If *deleting* a member, print the name and write DELETE in the right margin.

If not adding or deleting supervising members, leave blank.

THERE IS NO ADDITIONAL FEE FOR THIS SECTION

MEMBER RESPONSIBLE FOR GROSS RECEIPTS - SECTION 14

14. Member Designated Responsible for Proper Utilization of Gross Received	pts
Name (Print Cleary)	Address (number, street, city, state, ZIP)
De des Electros Musico	
Daytime Telephone Number	Alternate Telephone Number
Date of Birth (month,day,year)	Number of Years as an Artive Member of This Organization
Signature of Designated Responsible Member	(mm/dd/ccyy)
Subscribed and sworn before methis	day of,
Signature of Notary Public	Date Commission Expires

14. If changing designated member, enter in all information and have notarized. If no change, leave blank.

This section *must be notarized*.

THERE IS AN ADDITIONAL \$10 FEE IF CHANGING MEMBER IN SECTION #14

AUTHORIZED AGENT - SECTION 15

15. Authorized Agent
Name (Print Clearly) Address (number street, city, state, ZIP)
Daytime Telephone Number
Signature of Authorized Agent Date (mm/dd/ccyy) Subscribed and sworn before me twis
Signature of Notary Public Date Commission Expires

15. This section is to be completed *on every amendment application*. This can be the same person or a change.

<u>NOTE</u>: If changing authorized agent, this section *must be notarized*. If no change, this section need only be completed and signed by authorized agent, but does not need to be notarized.

<u>THERE IS NO ADDITIONAL FEE FOR SECTION #15</u> (EVEN IF CHANGING NAME)

If you have any questions on completing the bingo amendment application, please call (608) 270-2530 or (800) 791-6970.