Raffle Guidelines

Eastern Oregon University has a Class A state raffle license; however, <u>many</u> regulations still apply. Raffles, like all fundraising events require approval prior to conducting them.

According to OAR (137-025-0310), the following information <u>MUST</u> be printed on each ticket sold or otherwise disclosed to each ticket purchaser at the time of the ticket sale:

- A. The date and time of the drawing
- B. The location of the drawing
- C. The name of the organization conducting the raffle
- D. The price of the ticket
- E. The description of the prizes to be awarded
- F. The retail value of each prize
- G. The total number of tickets to be sold

According to the OAR (137-025-0240), the Raffle Receipt Record report must be submitted after the raffle. The raffle report will include:

- A. The total amount of proceeds received from the sales of tickets for each raffle
- B. The total amount of expenses to conduct the raffle (excluding prizes)
- C. The total value of prizes awarded
- D. The winning ticket stub(s)

Please provide the following information for winners of prizes valued at \$100 or more:

- A. Name
- B. Address
- C. Signature
- D. The original winning ticket must be attached to the raffle packet

In addition to the Raffle packet, the following forms need to be completed and returned to the Center for Student Involvement office:

- A. Raffle Sales Log
- B. Raffle Individual Seller's Record Log

Any club found in violation of the aforementioned rules will be financially responsible for any fines incurred.

OREGON DEPARTMENT OF JUSTICE Raffle Receipt Record

This record must be maintained with your official raffle records for a period of three (3) years.

This record must be completed in non-erasable ink.

Licensee: <u>Eastern Oregon University</u>	Raffle License #: R-4966			
Date of Raffle Drawing:	Time:			
Location of Drawing:				
TICKET SALES INFORMATION				
HORET GAZES IN ORGANISM				
Maximum number of tickets to be sold:	Ticket price: \$			
Beginning ticket number:	Ending ticket number:			
Starting date for sales: Ending date of sales: Total sales: \$				
	(must be itemized on back of this page)			
	(must be itemized on back of this page)			
Total amount of cash prizes awarded: \$	(cannot exceed \$1500)			
Attach a complete vo	oided sample ticket to this sheet			
PRIZE INFORMATION				
	e for this raffle to this sheet. If you added any additional as filed, describe each prize and list its retail value on a			
SPECIAL PRIZE RECEIPTS				
You must obtain and attach a receipt from th value of \$500 or more. Attach the receipts to	e seller, distributor, or contributor of each prize with retail this sheet.			
RESPONSIBLE OFFICIALS				
Name:	Telephone:			
Address:				
Name:	Telephone:			
Address:				
Name:	Telephone:			
Address:				
Name:	Telephone:			
Address:				
Name:				
Address:				

WINNER INFORMATION List all winners of prizes valued at \$100 or more.

1.	Print winner's full name:						
	Address:						
	City:	State:	Zip:				
			Retail Value: \$				
	Winner's identification (signature)						
2.							
	Address:	•					
	City:	State:	Zip:				
	Prize Won:		Retail Value: \$				
	Winner's identification (signature)						
3.	Print winner's full name:	Print winner's full name:					
	Address:						
	City:	State:	Zip:				
	Prize Won:		Retail Value: \$				
4.	Print winner's full name:						
	Address:			***			
	City:	State:	Zip:				
	Prize Won:		Retail Value: \$				
	Winner's identification (signature)						
5.	Print winner's full name:						
	City:	State:	Zip:				
	Prize Won:		Retail Value: \$				
	Winner's identification (signature)						
6.	Print winner's full name:						
	Address:		9				
			Zip:				
	Prize Won:		Retail Value: \$				
	Winner's identification (signature)						
7.	Print winner's full name:						
	Address:						
	City:	State:	Zip:	100			
	Prize Won:		Retail Value: \$				
	Winner's identification (signature)						

RETURNED PRIZES	
Did any prize winner donate his/her prize If yes, name the prize winner and indicate	back to the raffle licensee? YesNo
if yes, name the prize wither and indicate	e the disposition of the donated prize.
UNCLAIMED PRIZES List any unclaimed prize	s here. All unclaimed prizes must be held for a period of one year. See OAR 137-25-290(5).
Prize:	
	Retail Value: \$
Winner's Name/Address if known:	
Did you attempt to contact winner? Yes_	No
Prize:	
Winning Ticket Stub Number:	Retail Value: \$
Winner's Name/Address if known:	
Did you attempt to contact winner? Yes_	No
Prize:	
Winning Ticket Stub Number:	Retail Value: \$
Winner's Name/Address if known:	
Did you attempt to contact winner? Yes_	No
Prize:	
Winning Ticket Stub.Number:	Retail Value: \$
Winner's Name/Address if known:	
Did you attempt to contact winner? Yes_	No
Prize:	
Winning Ticket Stub Number:	Retail Value: \$
Winner's Name/Address if known:	
Did you attempt to contact winner? Yes_	No
TICKET STUBS	
You must retain the winning ticket stubs the winning stubs to this sheet.	from each raffle, regardless of the value of the prize. Attach
CERTIFICATION	
I certify that the raffle described herein governing the conduct of raffles, OAR contained herein is true and accurate.	was conducted in compliance with the administrative rules 137-25-200 et. seq. I further certify that the information
Responsible Official's Signature:	· · · · · · · · · · · · · · · · · · ·
Title	Date:

OREGON DEPARTMENT OF JUSTICE Raffle Sales Log

This form must be maintained for raffles when sales are intended to exceed \$10,000.

Licensee:				Raffle License #: R-		
Date of Raffle Drawing:		1111		Time:		
Location of Drawing (street address):		City:		State:	Zip:	
Ticket Sales for sale, Include		of all individuals who received tickets # of tickets received, returned unsold, t, and sold, plus amount.		Sales Price per Ticket:	\$	
Seller's Name	# Tickets Received	# Tickets Returned	# Tickets Lost	# Tickets Sold	\$ Amount of Money Turned-In	
	-					
·						
		· · · · · · · · · · · · · · · · · · ·				
Totals			<u> </u>		\$	

OREGON DEPARTMENT OF JUSTICE Raffle Individual Seller's Record

Name of Seller:					
Licensee Date of Raffle Drawing: Location of Drawing (street address):		License #: R-			
		Time:			
		City:	State:	Zip:	
INSTRUCTIONS:	Complete and sign this reconcilitickets with this form to the Licer	ation report and turn	in all money, stubs a are sold or by (date)	nd unsold	
1	Sales Price per Raffle Ticket:		\$		
2	Number of Raffle Tickets Issued to Seller:				
3	Number of Raffle Tickets Returned Unsold:				
4	Number of Raffle Tickets Sold (#2 less #3):				
5	Total Amount Due (#4 times #1):		\$		
Notes:					
	1,000				
Seller's Signature:			Date:		