MICHIGAN LOTTERY
Charitable Gaming Division
c/o Accounting
Box 30023, Lansing, MI 48909
OVERNIGHT DELIVERY:
101 E. Hillsdale, Lansing MI 48933
(517) 335-5780
www.michigan.gov/cg

BINGO LICENSE APPLICATION PART 1

For Bureau Use Only

ALLOW 6 WEEKS FOR PROCESSING.
PLEASE PRINT OR TYPE IN BLUE OR BLACK INK.

ORGANIZATION INFORMATION

1. Organization Name				2. Organization ID Number or Last License Number Issued
3. Organization Address	City	State	ZIP Code	County
4. Mailing Address, if different	City	State	ZIP Code	County
5. Organization Telephone Number ( )	6. Contact Person	7. Contact Person's Telephone Number ( )		

8. Is your organization a candidate committee, political committee, political party committee, ballot question committee, independent committee or any other committee as defined by, and organized pursuant to, the Michigan Campaign Finance Act 388 of the Public Acts of 1976, as amended, being sections 169.201 to 169.282 of the Michigan Compiled Laws?
☐ Yes ☐ No

9. Has your organization received contributions or made expenditures of $500 or more in the last calendar year for the purpose of influencing or attempting to influence the action of voters for or against the nomination or election of a candidate, or the qualification, passage, or defeat of a ballot question?
☐ Yes ☐ No

ORGANIZATION OFFICERS

10. List name, title, home address, and telephone numbers of principal officer, e.g., president, grand knight, worthy matron, etc., and other officers of the organization. (Attach additional sheets if necessary.)

Name and Title	Street, City, State, ZIP Code	Telephone Numbers
Name		Day ( )
Title		Evening ( )
Name		Day ( )
Title		Evening ( )
Name		Day ( )
Title		Evening ( )
Name		Day ( )
Title		Evening ( )

FEE & SIGNATURE

11. Type of license and fee: (check one)
☐ $150 Large Bingo ☐ $55 Small Bingo Make checks payable to: STATE OF MICHIGAN

12. I CERTIFY that I am at least 18 years of age, the organization applying is a NONPROFIT organization, I have examined this application and there is no misrepresentation or falsification in the information stated or attached, and the facts underlying our original qualification status remain unchanged. I FURTHER CERTIFY that I am aware that false or misleading statements will be cause for rejection of this application or revocation of the right to obtain any future licenses and I AM AWARE OF AND AGREE TO the conditions of Act 382 of the Public Acts of 1972, as amended, and the rules and directives of the Michigan Bureau of State Lottery.

Signature of the PRINCIPAL officer, e.g., president, grand knight, worthy matron, etc. NOTE: Executive director signature not acceptable.

Signature	Print Name	Title	Date

PLEASE MAKE A COPY OF THE COMPLETED APPLICATION FOR YOUR RECORDS

COMPLETION: Required for licensure.
PENALTY: No license will be issued.

Authority: Act 382 of the Public Acts of 1972, as amended.