



Charitable Gaming Division
 101 E. Hillsdale, Box 30023
 Lansing, Michigan 48909
 (517) 335-5780
 www.michigan.gov/cg

HOT BALL ACCOUNTABILITY

Organization Name	Completed By	License Number
-------------------	--------------	----------------

Event Date	Hot Ball Number	Hot Ball Sales*	Amount Applied to Prize	Hot Ball Prize (accumulated)
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$

TOTAL: \$

Profit:
 (Total Hot Ball Sales - Hot Ball Prize) \$ _____

Winner Received:** \$ _____ Cash
 Check # _____

Winner Name (print)	Phone
Winner Signature	Date

* Enter weekly Hot Ball Sales on Disposable Bingo Card Accountability form (Door Sales)
 ** Enter prize paid on Bingo Prize Payout Log

COMPLETION: Required.
 PENALTY: Failure to complete this form may result in administrative action.