

SECTION I





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# WASHINGTON STATE GAMBLING COMMISSION, P. O. BOX 42400, OLYMPIA, WA 98504-2400

BANK TAVERN PO BOX 73 EPHRATA WA 98823 (360) 486-3440 2022-4

ClientNo: 00-24899 LicenseNo: 05-21762

THIS REPORT COVERS THE PERIOD

10/01/2022 - 12/31/2022 Due Date 01/31/2023

Late Fee Begins 02/01/2023

# **PUNCH BOARD/PULL-TAB**

### **QUARTERLY LICENSE REPORT**

You can submit this report and calculate and pay your Quarterly License Fee on-line in My Account at <a href="www.wsgc.wa.gov">www.wsgc.wa.gov</a>. Submit report even if you had no activity. Refer to instructions for filing. PLEASE ROUND TO NEAREST WHOLE DOLLAR.

\$
\$
\$
check one - over short
n - round all to nearest whole dollar
License Fee Paid To Due Date \$700
(b) <u>QLF Due</u>
(c) – (d) \$700 = (e) <b>.00</b>
the manifestory and a the manifestory in (a) the manifestory (b)
n the maximum, enter the maximum in (c), then subtract (d) from (c).
jury that this report (Including any accompanying statements or e and belief is true, correct, and complete.
jury that this report (Including any accompanying statements or

## WASHINGTON STATE GAMBLING COMMISSION INSTRUCTIONS FOR QUARTERLY LICENSE REPORT - PUNCH BOARD/PULL-TAB

#### PLEASE READ INSTRUCTIONS CAREFULLY

You must file this report if your license was active for the quarter, even if you had no activity. If you fail to report and pay your Quarterly License Fee (QLF) (if due) by the due date, it could result in a daily late fee of \$25 and/or administrative action. You may face administrative action against your license for failing to accurately report. Mail this report and any fees due directly to Washington State Gambling Commission, PO Box 42400, Olympia, WA 98504-2400. If you have questions, please call us at (360) 486-3440 or (800) 345-2529 (in-state only). This report is required by WACs 230-05-102, 230-05-124 or 230-05-132. The information is used for reports submitted to the Governor and the Legislature pursuant to RCW 9.46.090.

## ROUND ALL AMOUNTS TO THE NEAREST WHOLE DOLLAR ROUND DOWN FOR \$0.50 AND LESS; ROUND UP FOR \$0.51 AND MORE

#### **SECTION I**

- **LINE 1:** Gross Gambling Receipts Enter the amount of gross gambling receipts as defined in WAC 230-05-112(a). This is the combined total of gross receipts from all "removed games" (column 5 from your monthly income summaries) for each quarter. Punch boards should be reported with pull-tabs (including fishbowls, peanut spindles, etc.). Do not adjust for over/short, lost or stolen punches or tabs (cash over or short is reported on line 4).
- LINE 2: Prizes Paid Enter the combined total of cash prizes paid out on the "cash" line and the cost to the licensee of all merchandise awarded as prizes on the "merchandise" line (column 6 from your monthly income summaries).

  Include only the actual prizes awarded for each quarter. Merchandise purchased, but not awarded, should not be included on the report.
- **LINE 3:** Local Gambling Taxes Enter the taxes paid to a City or County, which is directly related to the gambling activity during the quarter.
- **LINE 4:** Cash Over/Short Enter the total over/short from gambling activity during the quarter (column 11 from your monthly income summaries). Check the appropriate box.



#### **Examples of Over/Short:**

Gross Receipts \$100 - Total Amount Deposited \$98 = SHORT \$2, or Gross Receipts \$100 - Total Amount Deposited \$105 = OVER \$5

#### **SECTION II: Quarterly License Fee Calculation**

- **Box (a):** Enter the Gross Gambling Receipts from Line 1.
- Box (b): Multiply (a) by the Gross Gambling Receipts Rate and enter total in (b).
- Box (c): Add all QLFs for the year and enter total in (c). Do not enter more than the maximum annual license fee.
- **Box (e):** Subtract (d) Paid to Date from (c) QLF and enter in (e) QLF Due. Do not enter more than the maximum annual license fee. Make check payable to WSGC and send it postmarked by the Due Date. If QLF Due is less than ZERO, enter ZERO (no payment is due) and send report postmarked by the due date.

**Signature And Verification**: This line **MUST** be **signed** by the highest ranking officer, member or authorized employee of this organization for this report to be valid. IF THIS REPORT IS NOT SIGNED, IT WILL BE RETURNED AND CONSIDERED NOT RECEIVED. Also print the name and title of the person signing the form, the daytime telephone number for this person, and the date the report was signed.