

LG240B Application to Conduct Excluded Bingo

No fee

ORGANIZATION INFORMATION			
Organization name Ramsey Women of Today	Previous gambling permit number XB-05229-06-001		
Minnesota tax ID number, if any 1905764	Federal employer ID number, if any 41-1796712		
Type of nonprofit organization. Check (✓) one. <input type="checkbox"/> Fraternal <input type="checkbox"/> Religious <input type="checkbox"/> Veterans <input checked="" type="checkbox"/> Other nonprofit organization			
Mailing address 14672 Junkite St NW	City Ramsey	State Zip Code MN 55303	County Anoka
ATTACH A COPY OF ONE OF THE FOLLOWING FOR PROOF OF NONPROFIT STATUS			
<p>★ Do not attach a sales tax exempt status or federal ID employer number as they are not proof of nonprofit status.</p> <p><input checked="" type="checkbox"/> Nonprofit Articles of Incorporation OR a current Certificate of Good Standing. Don't have a copy? This certificate must be obtained each year from: Secretary of State, Business Services Div., 180 State Office Building, St. Paul, MN 55155 Phone: 651-296-2803</p> <p><input type="checkbox"/> Internal Revenue Service - IRS income tax exemption [501(c)] letter in your organization's name. Don't have a copy? To obtain a copy of your federal income tax exempt letter, have an organization officer contact the IRS at 877-829-5500.</p> <p><input type="checkbox"/> Internal Revenue Service - Affiliate of national, statewide, or international parent nonprofit organization (charter) If your organization falls under a parent organization, attach copies of <u>both</u> of the following: a. IRS letter showing your parent organization is a nonprofit 501(c) organization with a group ruling, and b. the charter or letter from your parent organization recognizing your organization as a subordinate.</p>			
EXCLUDED BINGO ACTIVITY			
<p>1. <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Has your organization held a bingo event in the current calendar year? If yes, list the dates when bingo was conducted <u>9/18/10</u></p> <p>2. The proposed bingo event for which we are applying will be: <input checked="" type="checkbox"/> one of four or fewer bingo events held this year. Dates <u>9/16/11</u> <u>9/17/11</u></p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> conducted up to 12 consecutive days in connection with a: <u> </u> county fair. Dates <u> </u> <u> </u> civic celebration. Dates <u> </u> <u> </u> Minnesota state fair. Dates <u> </u></p> <p>3. Person in charge of bingo event <u>Julie Hammel</u> Daytime phone <u>763-433-0407</u></p> <p>4. Name of premises where bingo will be conducted <u>Ramsey Town Center</u></p> <p>5. Premises street address <u>7550 Sunwood Drive NW</u></p> <p>6. City <u>Ramsey</u> If township, name of township <u> </u> County <u>Anoka</u></p>			
<p>Bingo hard cards and bingo number selection devices may be borrowed from another organization authorized to conduct bingo. Otherwise, bingo hard cards, bingo paper, and bingo number selection devices must be purchased from a distributor licensed by the Gambling Control Board. To find a licensed distributor, go to www.gcb.state.mn.us and click on List of Licensed Distributors. Or call 651-639-4000.</p>			

Be sure to complete page 2

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Chief Executive Officer's Signature		Print form and have CEO sign
<p><i>The information provided in this application is complete and accurate to the best of my knowledge.</i></p>		
Chief executive officer's signature <u>Julie K Hammel</u>	Phone number <u>7634330407</u>	
Name (please print) <u>Julie K Hammel</u>	Date <u>9/6/2011</u>	
Local Unit of Government Acknowledgment and Approval		
<p>If the gambling premises is within city limits, the city must sign this application.</p>		
<p><i>On behalf of the city, I approve this application for excluded bingo activity at the premises located within the city's jurisdiction.</i></p>		
Print city name <u>City of Ramsey</u>		
Signature of city personnel receiving application <u>[Signature]</u>		
Title <u>Finance Director</u>		Date <u>9/6/11</u>
<p>If the gambling premises is located in a township, only the county is required to sign this application.</p>		
<p>For the county: <i>On behalf of the county, I approve this application for excluded bingo activity at the premises located within the county's jurisdiction.</i></p>		
Print county name _____		
Signature of county personnel receiving application _____		
Title _____		Date _____
<p>For the township: <i>On behalf of the township, I acknowledge that the organization is applying for excluded bingo activity within the township limits.</i></p>		
(Township signature is not required)		
Print township name _____		
Signature of township official acknowledging application _____		
Title _____		Date _____
<p>A township has no statutory authority to approve or deny an application (Minn. Stat. 349.166, Subd. 2).</p>		
Mail Application and Attachment(s)		
Send the application and proof of nonprofit status to: Gambling Control Board Suite 300 South 1711 W. County Rd. B Roseville, MN 55113 Or, you may fax it to 651-639-4032.	You will receive a document from the Gambling Control Board with your excluded permit number for the gambling activity. Your organization must keep its bingo records for 3-1/2 years. Questions? Contact the Gambling Control Board at 651-639-4000. This form will be made available in alternative format (i.e. large print, Braille) upon request.	
		Reset Form

Data privacy notice: The information requested on this form (and any attachments) will be used by the Gambling Control Board (Board) to determine your organization's qualifications to be involved in lawful gambling activities in Minnesota. Your organization has the right to refuse to supply the information; however, if your organization refuses to supply this information, the Board may not be able to determine your organization's qualifications and, as a consequence, may refuse to issue a permit. If your organization supplies the information requested, the Board will be able to process your organization's application.

Your organization's name and address will be public information when received by the Board. All other information provided will be private data about your organization until the Board issues the permit. When the Board issues the permit, all information provided will become public. If the Board does not issue a permit, all information provided remains private, with the exception of your organization's name and address which will remain public.

Private data about your organization are available to: Board members, Board staff whose work requires access to the information; Minnesota's Department of Public Safety; Attorney General; Commissioners of Administration, Minnesota Management & Budget, and Revenue; Legislative Auditor, national and international gambling regulatory agencies; anyone pursuant to court order; other individuals and agencies specifically authorized by state or federal law to have access to the information; individuals and agencies for which law or legal order authorizes a new use or sharing of information after this notice was given; and anyone with your written consent.