

# Progressive Account Quarterly Report

Do not write in this space

Accepted       Conditional       Denied  
 Reviewed By \_\_\_\_\_ Date \_\_\_\_\_

**Mail to: Office of Charitable Gaming**  
 P.O. Box 98502  
 Baton Rouge, LA 70884-9502  
 (225) 925-1835 or 1-800-562-9235

Reporting Period Quarter _____ Year 20____	Posted Total of Progressive Jackpot as of End of Quarter
---	---

Please Type or Print Name and Address of Company	State License Number CL _____ G _____
	Is this a Final Report? Yes _____ No _____
	Is this an Amended report? Yes _____ No _____

<b>A.</b> # of Organizations in Progressive Games	<b>B.</b> Progressive Games Played 1 – Yes or No      2 – Yes or No			
<b>C.</b> Current Jackpot Amount	<b>D.</b> What is the Current Cap Amount?		<b>E.</b> What is the amount of the Backup Jackpots?	
Progressive Jackpot #1      Progressive Jackpot #2 \$                                      \$	First	Second	First	Second
<b>F.</b> What was the last check number written? (Date and to whom it was written.) Number: Date: To Whom:	<b>G.</b> Number of Orgs that withdrew		<b>H.</b> Total number of Sessions for first progressive game and amount paid per session.	
	Sessions	Amount Paid	Sessions	Amount Paid
			<b>I.</b> Total number of Sessions for second progressive game and amount paid per session.	

**SECTION 1: Current Quarter Activity (Please complete and attach Schedules A-C for this section.)**

1. The carryover dollar amount of the Progressive Account from Previous Quarter.		
2. Add: Startup Fees received in the Current Quarter		
3. Add: Current Quarter contributions to the Progressive Account		
4. Add: Any interest earned in the Current Quarter.		
5. Less: Startup Fees refunded during Current Quarter.		
6. Less: Bank Fees and Miscellaneous Expenses.		
7. Adjustments		
8. Less: Winners paid in Current Quarter.		
9: Total dollar amount of the Progressive Account to be carried over.		

**Section 2: Reconciled bank information (Please attach copy of quarter ending bank statements and reconciliations.)**

Name of Bank	Account Number	Bank Balance
Less Startup Fees		
Other		
<b>Posted Total of Progressive Jackpot as of end of Quarter</b>		

**Signature and Verification**

Under penalties of LA R.S. 4:735, I declare that I have examined this report, including any schedules and statements, and to the best of my knowledge and belief it is a true, correct and complete report. Declaration of preparer (other than company official) is based on all available information.

Signature of Company Official	Title	Date
Signature of Preparer	Telephone Number	Date



## Progressive Jackpot Report

**This form must be submitted with the Progressive Account Quarterly Report, bank statements and reconciliations to the Office of Charitable Gaming by the last business day of the first month following the end of the quarter. The report cannot be faxed as it must include original signatures.**

**Please check the number of progressive bingo games that apply to your hall. If none, please mark the zero line, write in the contact name and phone number and submit to the Office.**

0 \_\_\_\_\_

1 \_\_\_\_\_

2 \_\_\_\_\_

List all current progressive jackpot balances, as well as all associated backup jackpots, that are posted in the hall **as of the last game held each quarter**. Contact the Office at 1-800-562-9235 if you have any questions.

**Current Progressive Jackpot #1 (Posted)** \_\_\_\_\_

**Total Backup Pots for #1 (Posted)** \_\_\_\_\_

**Total Dollar Value of Progressive Jackpot #1** \_\_\_\_\_

\*\*\*\*\*

**Current Progressive Jackpot #2 (Posted)** \_\_\_\_\_

**Total Backup Pots for #2 (Posted)** \_\_\_\_\_

**Total Dollar Value of Progressive Jackpot #2** \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone # \_\_\_\_\_

ocg310

*Office of Charitable Gaming  
8585 Archives Ave., Suite 301  
PO Box 98502, Baton Rouge, LA 70884-9502  
225-925-1835 219-1910 fax  
800-562-9235*

**OFFICE OF CHARITABLE GAMING  
PROGRESSIVE ACCOUNT QUARTERLY REPORT**

**SCHEDULE A**

			CURRENT		STARTUP FEES	FIRST PROGRESSIVE	FIRST PROGRESSIVE	SECOND PROGRESSIVE	SECOND PROGRESSIVE
LIST ALL ORGANIZATIONS	G NUMBER	NEW	STARTUP FEES	WITHDREW	REFUNDED	NUMBER OF SESSIONS	CURRENT CONTRIBUTIONS	NUMBER OF SESSIONS	CURRENT CONTRIBUTIONS
<b>TOTALS</b>									

**BOX A**

**LINE 2**

**BOX G**

**LINE 5**

**BOX H**

**LINE 3**

**BOX I**

**LINE 3**

**OFFICE OF CHARITABLE GAMING  
 PROGRESSIVE ACCOUNT QUARTERLY REPORT**

**SCHEDULES B AND C**

**SCHEDULE B: BACKUP JACKPOTS(BOX E)**

	FIRST PROGRESSIVE	SECOND PROGRESSIVE
JACKPOT 1	_____	_____
JACKPOT 2	_____	_____
JACKPOT 3	_____	_____
JACKPOT 4	_____	_____
JACKPOT 5	_____	_____
<b>TOTAL</b>	=====	=====

**SCHEDULE C: WINNERS PAID DURING CURRENT QUARTER(LINE 8)**

LIST WINNING CHECK PAYEE'S	CHECK NO. / DATE	AMOUNT
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
<b>TOTAL</b>	_____	=====