



AFFIDAVIT FOR 10% GAMBLING CONTRIBUTIONS

(For 2016 10% Eligibility Application)



Date:
This affidavit must be filed annually for each officer of the organization. It is your responsibility to notify us of any change in officers.

- 1) Name of organization:
- 2) Name and title of officer authorized by the organization to accept gambling donations.
First Name: Last Name: Title:

I, (full name) (title)

Of (name of organization)

Do certify that I have read section 409.235 of the Saint Paul legislative Code pertaining to the receipt of gambling funds and I certify that I am authorized to act for (name of organization) in this matter.

That information provided in this affidavit is true and correct; that all gambling contributions will be expended for the lawful purpose as defined by State Statute 349.12; that all previous contributions (if any) have been expended for the lawful purpose; that no contribution will be or has been used for capital expenses, salaries, or travel expenses except as allowed in Section 409.235 of the Legislative Code; that the (name of organization)

Does not operate or participate in any gambling activities; and that 10% contributions / grants will not be accepted by this organization in any calendar year in excess of the amount allowed under the ordinance.

Signature _____ Date: _____

State of Minnesota)
)
County of Ramsey)

Subscribed and sworn to before me this _____ day of _____, 2015

Notary Public _____ County, MN
My Commission expires: _____

Signature of Notary Public: _____

Please return affidavit to:
St. Paul Parks and Recreation
ATTN: Eric Thompson
1100 Hamline Ave. N.
Saint Paul, MN 55108
eric.thompson@ci.stpaul.mn.us