

**CITY OF LINCOLN LOTTERY / RAFFLE TAX REPORT  
(TO BE SUBMITTED AT CONCLUSION OF LOTTERY / RAFFLE)**

Nebraska Identification #: \_\_\_\_\_

For Quarter Ending (Month, Day & Year): \_\_\_\_\_

Licensee's Name: \_\_\_\_\_

Licensee's Street (or Mailing) Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

DATE OF EVENT	GROSS RECEIPTS	PAY-OUTS	TOTAL TAX DUE (5% of Gross Receipts)
<b>TOTAL FOR QUARTER REPORTING:</b>			

***Please sign & date with proper identification in front of a Notary Public.***

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**NOTARY PUBLIC**

COUNTY OF \_\_\_\_\_

STATE OF \_\_\_\_\_

Subscribed & sworn to as being a true statement, before me, a Notary Public, this \_\_\_\_\_ day of

\_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public