



Commercial Lessor Source of Funds

WHO MUST SUBMIT THIS FORM

This form must be submitted by an applicant for a commercial lessor license seeking to license a bingo premises where the applicant is not currently licensed. Use this schedule to identify the source and terms of the funds to be used to obtain the premises with furniture, fixtures, equipment, utilities, or to renovate the premises to ensure compliance with Bingo Enabling Act, Section 2001.153(a).

FORM SUBMISSION

By mail: Texas Lottery Commission, Charitable Bingo Operations Division, PO Box 16630, Austin, TX 78761-6630

FOR ASSISTANCE in completing this form, please call 1-800-BINGO-77 (1-800-246-4677) or visit our website at txbingo.org.

GENERAL INSTRUCTIONS

- Use black or blue ink only.
- All fields must be completed.
- All attachments must be in the name of the license applicant.
- When submitting bank statements, enclose the three (3) most recent consecutive months prior to the date the application was submitted.
- Under the Expenses Section, if an expense was incurred, please provide details of the expense item such as types or number of items provided.
- This schedule must be signed by the sole owner, two (2) officers of a corporation, two (2) members of a limited liability company, or two (2) partners of a partnership, as applicable.

| | |
|--|-----------------|
| Name of Organization Applying as a Commercial Lessor | Taxpayer Number |
|--|-----------------|

LOCATION OF THE PREMISES

| | | |
|------------------------------------|-------|----------|
| Premises Name (Name of Bingo Hall) | | |
| Address | | |
| City | State | ZIP code |

EXPENSES

Please indicate if the following items of expense were/are furnished by another party or a partial or full expense was incurred by your organization. Please indicate the amount and details of that expense: **(Attach additional sheets if necessary. Additional sheets attached.)**

Furniture Furnished/No Expense Partially Furnished/Partial Expense Not Furnished/Full Expense Amount \$ _____

If provided, by whom? _____

Details: _____

Fixtures Furnished/No Expense Partially Furnished/Partial Expense Not Furnished/Full Expense Amount \$ _____

If provided, by whom? _____

Details: _____

Equipment Furnished/No Expense Partially Furnished/Partial Expense Not Furnished/Full Expense Amount \$ _____

If provided, by whom? _____

Details: _____

Utilities Furnished/No Expense Partially Furnished/Partial Expense Not Furnished/Full Expense Amount \$ _____

If provided, by whom? _____

Details: _____

Renovation Furnished/No Expense Partially Furnished/Partial Expense Not Furnished/Full Expense Amount \$ _____

If provided, by whom? _____

Details: _____

SOURCE OF FUNDS

Please identify the source of the funds to be used to obtain the premises identified above, provide the bingo premises with any needed furniture, fixtures, equipment, utilities, or renovate of the premises.

- 1. Personal Funds
 - Attach the three (3) most recent consecutive months of bank statements.
- 2. Commercial Loan
 - Attach copy of the approved loan application.
- 3. Other Loan
 - Attach supporting documentation that would outline the amount and terms of the agreement.
- 4. Gift
 - Attach supporting documentation that would indicate the amount and support that the funds were a gift and there is no obligation for repayment.

TERMS OF THE FUNDS OBTAINED

If the source of the funds was a commercial loan, other loan or gift as identified above, were the funds obtained under an expectation or obligation that the person from whom the funds were obtained would directly participate in, or have any legal interest in, any rents obtained under the license or revenues or profits from the conduct of bingo on the premises? Y E S N O

If yes, please explain: _____

sign here ▶ _____ | _____ | _____
 Sole Owner, Partner, LLC Member, or Officer of the Organization Print Name and Title Date

sign here ▶ _____ | _____ | _____
 Partner, LLC Member, or Officer of the Organization Print Name and Title Date