

MAJOR LEAGUE SPORTS RAFFLE MANUAL DRAW SUPERVISOR ANNUAL REGISTRATION FORM

FOR CALENDAR YEAR 20

MAIL TO:
Bureau of Gambling Control
P. O. Box 168024
Sacramento, CA 95816-8024
Phone: (916) 830-1700

Pursuant to California Penal Code section 320.6, person(s) affiliated with the eligible organization who supervise the manual draw must register annually with the Department of Justice. This form is to be used by an eligible organization to register person(s) who will supervise the manual draw.

Please type or print (in ink) all information requested on this form. A nonrefundable \$20 Annual Registration Fee for each Manual Draw Supervisor listed in Section 2 must accompany this form. Make check or money order payable to the California Department of Justice.

SECTION 1: INFORMATION												
Eligible Organization			Tear	Team or Association Affiliation								
Fiduciary's First Name	Midd			liddle Initial D		Daytime Telephone Number						
Eligible Organization Address (no. and street name)		City				State	Zip Code					
Mailing Address, if different (no. and street name)			City				State Zip Code		Zip Code			
SECTION 2: MANUAL DRAW SUPERVISOR												
First Name	Last Name		iddle nitial	Employee's Government Issued ID #	Туре		ре	Issuing Agency				

MAJOR LEAGUE SPORTS RAFFLE MANUAL DRAW SUPERVISOR ANNUAL REGISTRATION FORM



SECTION 3: CERTIFICATION

I declare under penalty of perjury under the laws of the State of California that the foregoing information, and all information submitted with this application is true, correct, and complete. I understand that the information I have provided on this form will be verified with the eligible organization as part of the registration process. I agree to comply with all applicable laws, local ordinances, and administrative regulations concerning major league sports raffles in the State of California.

	First Name	Last Name		Middle Initial
Fiduciary's Printed Name				
Fiduciary's Signature:			Date:	
	Privacy Notice on Data Co As Required by Civil Coo			

Collection and Use of Personal Information

The Division of Law Enforcement, Bureau of Gambling Control in the Department of Justice collects the information requested on this form as authorized by California Penal Code section 320.6. The Bureau uses this information to establish grounds for the license, permit or other approval indicated on this application form. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The Department of Justice's general privacy policy is available at http://oag.ca.gov/privacy-policy.

Providing Personal Information

All the personal information requested in this form must be provided.

Access to Your Information

You may review the records maintained by the Division of Law Enforcement, Bureau of Gambling Control in the Department of Justice that contain your personal information as permitted by the Information Practices Act. (See below for contact information.)

Possible Disclosure of Personal Information

In order to process your application, we may need to share the information you give us with law enforcement or regulatory agencies.

The information you provide may also be disclosed in the following circumstances:

- With other persons or agencies where necessary to perform their legal duties, and their use of your information is compatible and complies with state law, such has for investigations or for licensing, certification, or regulatory purposes;
- To another government agency as required by state or federal law.

Contact Information

For questions about this notice or access to your records, you may contact the Special Agent Supervisor of Special Programs at the Department of Justice, Bureau of Gambling Control, at P. O. Box 168024, Sacramento, CA 95816-8024, (916) 830-1700 or e-mail at GamblingControl@doj.ca.gov