This form may be obtained at aglc.ca



Request to Donate Use of Proceeds Outside Alberta

Return this form to:

Email: gaming.useofproceeds@aglc.ca
AGLC Use of Proceeds

50 Corriveau Avenue, St. Albert, Alberta T8N 3T5 Use of Proceeds Line: 780-651-7600 ext. 9

Toll-Free: 1-855-506-1066 ext. 9

Donations:

- 1. Outside Alberta, within Canada, over \$10,000 OR
- 2. Outside Canada over \$5,000

A Request to Amend Use of Gaming Proceeds form is not required when submitting a Request to Donate Proceeds Outside Alberta form

Donations Outside Alberta, Within Canada

Limited to a maximum cumulative total of 75% of gaming proceeds earned the previous calendar year. Eligible purposes include support for:

- disaster/emergency relief
- nationally recognized charitable programs that benefit Albertans
- medical and educational research programs that may benefit all Canadians

Subject to these uses, groups may make a total annual donation of \$10,000 or less to any eligible individual charity without prior AGLC approval. Retain a Recipient Agreement (Form 5507) but do not submit it to AGLC unless requested.

Submit these forms to AGLC for prior approval only for total annual donations over \$10,000:

- Request to Donate Proceeds Outside Alberta (Form 5502)
- Recipient Agreement (Form 5507) signed by the recipient group

Donations Outside Canada

Limited to a maximum cumulative total of 50% of gaming proceeds earned the previous calendar year. Eligible purposes include support for:

- Projects in countries that the Canadian federal government approves for international development
- Eligible projects include:
 - development of local self-sufficiency in the provision of basic human needs for water, food, sanitation, or shelter
 - provision of primary health care (acute care and public health) and basic education (reading, writing, and math)

Subject to these uses, groups may make a total annual donation of \$5,000 or less to any eligible individual charity outside Canada without prior AGLC approval. Retain a Recipient Agreement form but do not submit it to AGLC unless requested.

Submit these forms to AGLC for prior approval for total annual donations over \$5,000:

- Request to Donate Proceeds Outside Alberta (Form 5502)
- Recipient Agreement (Form 5507) signed by the recipient group

€ AGLC

Organization Information Name	ID#				
Address	City	/Town	Province	Postal Code	
Authorization for Application – V The undersigned confirms a) they are application is current and accurate.			and b) all information on o	r related to this	
Volunteer Elected Executive Signature		Position Held			
Legal Last Name		Legal First Name			
Legal Middle Name	Preferred Name	Date of Birth (YY/MM/DD)		YY/MM/DD)	
	, ,				
City/Town	Province	Postal Code			
Contact Phone	Email	,			
This request is for: (identify one) Donation outside Alberta, v Donation outside Canada	vithin Canada				
Net Gaming Revenue Earned in Pre-	vious Calendar Year	\$			
Requested amount of donation from	\$	\$			
		I			
A group that is required by its by governing body located outside A		•		a head office or to	
If applicable, what percentage of Alberta?					

Protection of Privacy

The personal information requested on this form is collected under the authority of Section 4(c) of the Alberta Protection of Privacy Act. It will be used for the administration of all policies and processes relating to Charitable Gaming Licensing. Automated systems may be used for internal analytics and/or support. If you have any questions, please contact our Privacy Officer at privacy@aglc.ca or via mail: AGLC, 50 Corriveau Avenue, St. Albert, AB T8N 3T5.

roup Name	up and Person Responsible for the Proj Contact	t Person		
lailing Address	City/Town		Province	Postal Code
ontact Phone	Email			
Recipient Group's Activiti (Briefly describe the recipier	es nt group's activities, use additional she	ets if necessary)		
(bitely describe the second	it group statementes, use automorphism			
				
Movement of Funds List any other individual/grou	up that may be responsible for the move	ement of funds befor	e they reach t	their destinatio
Provide names/address and	contact telephone number (use addition	nal sheets if necessary	y).	
Name	Address		Contact Phone	
Name	Address		Contact Phone	
Name	Address		Contact Phone	
Name	Address		Contact Phor	ne
Project Information				
Project/Facility				
<u>-</u>				
		D		
· /-		Province		
City/Town				
City/Town Anticipated Start Date	Anticipated Completion Date:	Total Cost of Proje	ect:	
	Anticipated Completion Date:	Total Cost of Proje	ect:	
Anticipated Start Date	Anticipated Completion Date:		ect:	
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Anticipated Start Date	Anticipated Completion Date:		ect:	
Anticipated Start Date	Anticipated Completion Date:		ect:	
Anticipated Start Date	Anticipated Completion Date:		ect:	
Anticipated Start Date Project Objectives: For Official Use Only			ect:	
Anticipated Start Date Project Objectives: For Official Use Only Approved	Anticipated Completion Date:		ect:	
Anticipated Start Date Project Objectives: For Official Use Only			ect:	