



**MISSOURI GAMING COMMISSION**  
**CHARITABLE GAMES DIVISION**  
**PO BOX 1847**  
**JEFFERSON CITY MO 65102**

**BINGO CHAIRPERSON FORM**

BINGO LICENSE NUMBER	
ORGANIZATION NAME	

In accordance with this regulation, please **provide in the space below** the name, address, social security number, date of birth and daytime telephone number of the bingo chairperson of your organization.

**Regulation 11 CSR 45-30.130 (1) states,** “Every licensed organization shall designate a bona fide, active member of the organization to be in charge of, and primarily responsible for, each bingo occasion. The member in charge may change from occasion to occasion. The individual shall have been a member in good standing of the licensed organization for the last six (6) months and shall supervise all activities and be responsible for the conduct of all bingo games of which s/he is in charge. the member in charge shall be continually present on the premises during the occasion and shall be familiar with the provisions of the bingo law, applicable ordinances, these regulations, and the licensee's house rules.”

BINGO CHAIRPERSON NAME	
ADDRESS	
CITY, STATE & ZIP	
SOCIAL SECURITY NUMBER	
DATE OF BIRTH	
DAYTIME TELEPHONE	