



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
DIVISION OF PARI-MUTUEL WAGERING
 1940 North Monroe Street
 Tallahassee, Florida 32399-1035

Permitholder		Fiscal Year Ending	
(1) BALANCE FORWARDED			\$
	Performance Date	Deposit Date	Amount
(2) TOTAL FUNDS DEPOSITED			\$
(3) TOTAL INTEREST EARNED			\$
(4) TOTAL AVAILABLE FOR DISBURSEMENT [Add lines (1),(2), and (3)]			
(5) DISBURSEMENTS (See number 1. below)			()
(6) FUND BALANCE AT END OF PERIOD [Line (4) less line (5)]			\$
REQUIRED ATTACHMENTS			
1. Detailed list of disbursements must include recipient name, address, date of check and check amount. 2. Attach list of current year retirement commitments to be paid in the future including recipient name, address and amount. 3. Copy of bank statement that reflects fund balance for end of period reported.			
Secretary, Retired Jai-Alai Players' Association			Date