Saskatchewan
Liquor and Gaming
Authority

Raffle Lottery Addendum Request

Licence number:	Organization Code:
Legal name of organization:	
Mailing address:	
City/Town:	Postal Code

Answer the following questions:

Have you started selling tickets: Yes ☐ No ☐

Have you started advertising Yes ☐ No ☐

Raffle Information

List changes and why:	Office use

Contact person: _____ _____ _____
(Print name) (Signature) (Date)

Residence telephone: _____ Business telephone: _____

To avoid delay, ensure this form is fully completed.

Mail request to: Saskatchewan Liquor and Gaming Authority
P.O. Box 5054, 12th Floor – 2500 Victoria Avenue
Regina SK S4P 3M3

SLGA will retain the personal information on this form only as long as it is necessary to fulfill the purposes for which it was collected and in accordance with approved mandatory retention policies and schedules established with cooperation of the Saskatchewan Archives Board under *The Saskatchewan Archives Act*.

For office use only	
Date:	
Officer:	