This form may be obtained from our website:

http://www.aglc.ca



HOST FIRST NATION REQUEST TO DONATE PROCEEDS OUTSIDE OF CANADA

Return this form to:

This form must be submitted and approved for all donations outside of Canada.

Regulatory Services 50 Corriveau Avenue, St. Albert, Alberta T8N 3T5 Toll-Free: 1-855-506-1066 / Fax: 780-447-7505

Donations outside of Canada are limited to a maximum of \$50,000 or 2.5% of the Proceeds earned the previous calendar year.

A Request to Donate Proceeds Outside of Canada (Form 4484) must be completed and submitted for approval. In addition, groups requesting to donate gaming proceeds outside of Canada, must provide the following information with the request:

- A Recipient Agreement signed by the recipient group stating the recipient group will:
 - O Maintain a record of donations showing the date, amount and source of donated funds received, as well as the date, amount and purpose of all disbursements of donated funds; and
 - O Allow the AGLC access to all records, including those at any financial institution and to make copies of such records and/or remove them for further examination.
- A Statutory Declaration (Form 5503) sworn by an executive member of the donor group.

Organization Name			
Name:		I.D.#:	
Addross:			
	City/Town	Postal Code	
Inspector may examine and any financial institution(s).	make copies of all records relating to this request ar	ne group has authorized us to make this request. Any AG and/or licence. This includes the approved bank account(s)	
Executive #1 Signature: _			
Print Full Name:			
Position Held:			
Mailing Address:			
_			
Contact Phone:	Email:	Postal Code	
Executive #2 Signature:	1		
Print Full Name:			
Position Held:			
Mailing Address:			
_		Postal Code	
Contact Phone:	Email:		
NET GAMING REVENUE EA	RNED IN PREVIOUS CALENDAR YEAR	\$	
REQUESTED AMOUNT OF DONATION FROM GAMING REVENUE		\$	

Donations outside of Canada

 □ A Recipient Agreement sign a) Maintain a record of depurpose of all disburse b) Allow AGLC access to a further examination. □ A Statutory Declaration (For Total detailed budget for present the project Information) 	need by the recipient group stating the recipient onations showing the date, amount and source ements of donated funds; and all records, including those at any financial institute at the state of the	group will: e of donated funds received, as well a itution, to make copies of such record	s the date, amount and
Location:	the state of the s		
Anticipated Start Date:	Village/District/Province Anticipated Completion Date:	Cour Total Cost of Project: \$	
Project Objectives (attach buc	lget specifying use of funds):		
Group Name:	oup and Person Responsible for Project in		
Contact Phone:	Email:		
List any other individual/g	roup that may be responsible for the saddress and contact telephone number (movement of funds before the use additional sheets if necessary	•
FOR OFFICIAL USE ONLY			
Approved		C. catalana	
Not Approved Incomplete		Signature:	
· ·		Date:	
Comments/Conditions:			

Protection of Privacy - The personal information requested on this form is collected under the authority of Section 33 (c) of the Alberta Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act. It will be used for the purpose of administration of all policies and processes relating to Host First Nation Charitable Gaming. Direct any questions about this collection to: AGLC FOIP Coordinator, 50 Corriveau Avenue, St. Albert, AB T8N 3T5 780-447-8600 or toll free at 1-800-272-8876.