



# City of Kerman

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## Finance Department, City of Kerman Bingo Games Permit Request

Organization Name:

Organization Address:

Street

City

State

Zip Code

Telephone No:

Bingo Manager Name:

Bingo Manager Address:

Street

City

State

Zip Code

Date(s) of Use:

Time of Use:

Location of Use and/or Address:

Funds are to be used for:

I have received a copy of the Bingo Rules for Fund Accounting:

Signed:

Date:

**BINGO PERMIT NUMBER:**