



Minnesota Racing Commission
ADW PROVIDER REGULATORY AND BREEDERS' FUND FEE SUBMITTAL

MS 240.131 Subd. 7. Payments to state

(a) A regulatory fee is imposed at the rate of one percent of all amounts wagered by Minnesota residents with an authorized advance deposit wagering provider. The fee shall be declared on a form prescribed by the commission. The ADW provider must pay the fee to the commission no more than seven days after the end of the month in which the wager was made. Fees collected under this paragraph must be deposited in the state treasury and credited to a racing and card-playing regulation account in the special revenue fund and are appropriated to the commission to offset the costs associated with regulating horse racing and pari-mutuel wagering in Minnesota.

(b) A breeders fund fee is imposed in the amount of one-quarter of one percent of all amounts wagered by Minnesota residents with an authorized advance deposit wagering provider. The fee shall be declared on a form prescribed by the commission. The ADW provider must pay the fee to the commission no more than seven days after the end of the month in which the wager was made. Fees collected under this paragraph must be deposited in the state treasury and credited to a racing and card-playing regulation account in the special revenue fund and are appropriated to the commission to offset the cost of administering the breeders fund and promote horse breeding in Minnesota.

Name of ADW Provider:

Address:

City:

State:

Zip:

Declaration of Regulatory Fees Payable for Period Ending Month:

Year:

1. Total amount of wagers placed via ADW provider by Minnesota residents during the above period:

(Including all pari-mutuel wagers, pooled wagers and contest entry fees)

\$

2. Total amount of regulatory and breeders' fund fee submitted (1.25% of amount of the total listed in question 1 above):

\$

Payment is attached

ACH effective date:

ACH Information Confirmation #

Bank Name:

I attest, under penalty of law, that the information provided in this document is true and accurate to the best of my knowledge. I understand that this information is to be used by the Minnesota Racing Commission to determine the amount owed under MS240.131. I understand that I may be contacted by telephone at the number provided below if there are questions regarding this document.

Signature: _____ Title:

Printed/Typed Name: _____ Date:

Phone Number: _____ Email Address: _____