

Amendment of Rule 1467, Paymaster of Purses  
Filed with Secretary of State June 24, 2019  
Effective October 1, 2019

# REGULAR

See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 01-2013)

OAL FILE NUMBERS	NOTICE FILE NUMBER Z- 2018-0827-01	REGULATORY ACTION NUMBER 2019-0517-06\$	EMERGENCY NUMBER
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For use by Office of Administrative Law (OAL) only

NOTICE	2019 MAY 17 P 2:59 OFFICE OF ADMINISTRATIVE LAW
NOTICE	REGULATIONS

**ENDORSED - FILED**  
 In the office of the Secretary of State  
 of the State of California

JUN 24 2019  
 1:39 PM

AGENCY WITH RULEMAKING AUTHORITY  
 California Horse Racing Board

AGENCY FILE NUMBER (if any)  
 Z-2018-0827-01

**A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)**

1. SUBJECT OF NOTICE	TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE <input type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON	TELEPHONE NUMBER	FAX NUMBER (Optional)
<b>OAL USE ONLY</b>	ACTION ON PROPOSED NOTICE <input checked="" type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	NOTICE REGISTER NUMBER 2018, 36-2	PUBLICATION DATE 9/7/2018

**B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)**

1a. SUBJECT OF REGULATION(S) Paymaster of Purses	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)
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2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (including title 26, if toxics related)	ADOPT
<b>SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)</b>	AMEND
4	REPEAL

3. TYPE OF FILING

<input checked="" type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))	<input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
<input type="checkbox"/> Resubmittal of disapproved or withdrawn non-emergency filing (Gov. Code §§11349.3, 11349.4)	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	<input type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))		<input type="checkbox"/> Other (Specify) _____	

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§11348.4, 11348.1(d); Cal. Code Regs., title 1, §100)

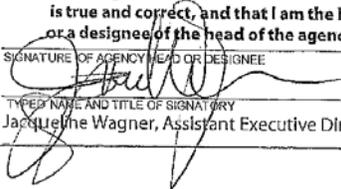
<input checked="" type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a))	<input type="checkbox"/> Effective on filing with Secretary of State	<input type="checkbox"/> §100 Changes Without Regulatory Effect	<input type="checkbox"/> Effective other (Specify) _____
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6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY

<input type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660)	<input type="checkbox"/> Fair Political Practices Commission	<input type="checkbox"/> State Fire Marshal
<input type="checkbox"/> Other (Specify) _____		

7. CONTACT PERSON Robert Brodnik	TELEPHONE NUMBER (916) 263-6025	FAX NUMBER (Optional) (916) 263-6042	E-MAIL ADDRESS (Optional) rjbrodnik@chr.ca.gov
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8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNEE 	DATE 5/13/19
TYPED NAME AND TITLE OF SIGNATORY Jacqueline Wagner, Assistant Executive Director	

For use by Office of Administrative Law (OAL) only

**ENDORSED APPROVED**

JUN 24 2019

Office of Administrative Law

CALIFORNIA HORSE RACING BOARD  
TITLE 4. CALIFORNIA CODE OF REGULATIONS  
ARTICLE 3. RACING ASSOCIATION  
PROPOSED AMENDMENT OF  
RULE 1467. PAYMASTER OF PURSES

1467. Paymaster of Purses.

(a) The association shall appoint a paymaster of purses who shall maintain records as the association and the Board direct. All records shall be separate from those of the Board and are subject to inspection by the Board at any time. The duties of the paymaster of purses or their assistants shall consist of the following:

(1) Maintain records which shall include the name, address, state or country of residence, social security number or federal identification number of each horse owner, trainer, driver, jockey or apprentice jockey participating at the race meeting who has funds due or on deposit in their horsemen's account.

(2) Keep jockey and driver accounts, receive their fees and disburse said fees to the proper claimants.

(3) Verify that the correct claiming price is on deposit with the association before any claim in a claiming race is accepted as official.

(4) Receive and disburse the purses and other awards of each race.

(5) Receive all stakes, entrance money, fines, purchase money in claiming races and other monies that properly come into the paymaster's possession.

(6) Accept money belonging to another association, provided the money is returned within five working days to that association.

(7) Disclose the Cal-bred awards to the respective breed agencies.

(8) Accept and file all required statements of partnerships, assignments of interest, lease agreements, and registrations of authorized agents.

(9) Disburse all monies to the entitled individuals, unless otherwise provided in this section, within 30 calendar days after the meet ends.

(10) Estimate escrow accounts and receive, maintain and disburse funds as directed by the Board.

(11) Deduct from the horse owner's account, and deposit into the account of the horse owner's trainer, 10 percent of the purse earned on any horse that finishes first, second or third at thoroughbred race meetings. Such payments shall be disbursed to the trainer and will be available at the office of the paymaster of purses no later than seven days after the race was conducted. Any amounts so paid shall be repaid to the paymaster forthwith by the trainer upon any order requiring redistribution.

(12) Deduct from the horse owner's account, and deposit into the account of the horse owner's trainer, 10 percent of the net purse earned on any horse that finishes first, second or third at quarter horse meetings. Such payments shall be disbursed to the trainer and will be available at the office of the paymaster of purses no later than seven days after the race was conducted. Any amounts so paid shall be repaid to the paymaster forthwith by the trainer upon any order requiring redistribution.

(b) For purposes of this regulation, "purse earned" or "net purse earned" means all amounts earned except in stakes races in which case "purse earned" or "net purse earned" means all amounts earned less any nomination, entry or starter fees paid by the owner.

(c) For purposes of subsections (a)(11) and (a)(12) above, horse owners may elect not to have 10 percent of the purse earned deducted from their account by filing with the paymaster of purses at each racing association at which the owner wishes it to be in effect, a form CHRB-134 (New 1/02), Notification of Exclusion To Trainer 10% Program, which is hereby incorporated by reference. The form CHRB-134 (New 1/02)

is available at the office of the paymaster of purses at any race meeting.

(d) A form CHRB-134 (New 1/02) may be filed with the paymaster of purses at any time during a race meeting, and

(1) Shall apply to all horses owned in whole or in part by the owner,

(2) Shall be binding on all licensed owners with an interest in the horse or horses,

(3) Shall apply to all trainers employed by the owner, and

(4) Shall remain in force until written revocation is submitted to the paymaster at the race meeting at which the form CHRB-134 (New 1/02) was submitted.

(e) In addition to the duties in subsection (a), the paymaster of purses shall deduct from the horse owner's account 0.3 percent of the net purse earned by any thoroughbred horse at a thoroughbred racing association or Fair meeting, and shall deduct from the jockey's and trainer's accounts 0.3 percent of the purse money they earn from any race conducted at a thoroughbred racing association or Fair meeting. Such deductions shall be deposited into the California Retirement Management Account (CARMA), a charitable trust fund maintained by the CARMA not-for-profit organization ~~maintained by the horsemen's organization representing thoroughbred horse owners (horsemen's organization)~~, for distribution to California thoroughbred retirement/rehabilitation facilities, which provide livestock care and services to retired thoroughbred horses that competed in thoroughbred races in California.

(1) Thoroughbred horse owners, jockeys, and trainers may elect not to have the 0.3 percent deducted from their net purses by filing with the paymaster of purses at each racing association for each race meeting at which the owners, jockeys, and trainers wish it to be in effect, a form CHRB-206 (~~New Rev. 06/1809/07~~), Notification of Exclusion of CARMA Contribution, which is hereby incorporated by reference. The form CHRB-206 (~~New Rev. 06/1809/07~~) is available at the office of the paymaster of purses

at any race meeting.

(2) ~~The horsemen's organization shall distribute CARMA funds~~ shall be distributed at least on an annual basis to retirement/rehabilitation facilities, as determined by the CARMA not-for-profit organization. Each such retirement/rehabilitation facility shall be:

- (A) A nonprofit corporation or organization.
- (B) Exempt or entitled to an exemption from federal or state income taxes.
- (C) Approved by the Board.

(3) ~~The horsemen's organization~~ The CARMA not-for-profit organization shall file with the Board within 90 days of the close of ~~its~~ CARMA's fiscal year an audited financial statement of the CARMA trust fund account.

NOTE: Authority: Sections 19420, 19440 and 19562, Business and Professions Code.

Reference: Sections 19420, 19433, 19434, 19440 and 19562, Business and Professions Code.

To: Paymaster of Purses at \_\_\_\_\_  
(Name of Racetrack)

Pursuant to Rule 1467, Paymaster of Purses, the undersigned hereby notifies the paymaster of purses that he or she elects **NOT** to deduct:

1.  From my owner's account for deposit into the California Retirement Management Account (CARMA), 0.3 percent of the net purse earned by any thoroughbred horse in which I have an interest.
2.  From my jockey or trainer account, for deposit into the California Retirement Management Account (CARMA), 0.3 percent of the purse money I have earned from any thoroughbred race.

**NAME AND CHRB LICENSE NUMBER**

\_\_\_\_\_  
\*Horse Owner or Stable Name and CHRB License Number

\_\_\_\_\_  
Jockey name and CHRB License Number

\_\_\_\_\_  
\*Trainer name and CHRB License Number

\*Note: If licensed as an owner and a trainer, print your name on the line for each license class.

**CONTACT INFORMATION**

Mailing Address:

\_\_\_\_\_  
Street Number

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

Contact Telephone Number: (\_\_\_\_) \_\_\_\_\_

FAX No.: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

List All Thoroughbred racing entities in which you have an interest, including Partnerships, Corporations and Limited Liability Companies:

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Paymaster Account Numbers: \_\_\_\_\_

The undersigned understands that **this notification is effective only at the racing facility indicated above**, and applies to all horses and/or purses in which the person or entity indicated above has an interest, until revoked in writing. The undersigned also declares that he/she is authorized to act on behalf of all entities listed above.

\_\_\_\_\_  
Signature of Authorized Licensed Horse Owner, Trainer, or Jockey                      Date

\_\_\_\_\_  
Print Name

**Distribution:**    Paymaster of Purses  
                         Licensed Horse Owner, Trainer or Jockey  
                         CARMA  
                         **DO NOT** forward a copy to CHRB.