LICENSEE NAME:	DATE:	ATTACHMENT A

CASHIER CAGE

CASH INVENTORY COMPLIANCE ATTRIBUTE WORKSHEET

A*					B*				Signatures I	3 *	C*		
Date	Licensee Name	Date	Shift	Open/Close	Time of Count	Inventory Recap (Optional)	Math	Errors Properly Corrected	On-Coming Cashier	Off-Going Cashier	Accounting	Doc tested- No Except.	Comments
Follow-Up													

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an "A" in lower right corner of box if accounting did detect the non-compliance issue

A* Indicate actual information.

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
# of exceptions noted at follow-up:	

LICENSEE NAME:	DATE:	ATTACHMENT B
CASHIER CAGE		

DAILY CASH SUMMARY COMPLIANCE ATTRIBUTE WORKSHEET

A	\ *		TRACED TO SUPPORTING DOCUMENTS B*													B*				itures B*	C*		
Date		Inv.	& Table	Fed State Inc. Tax W/H		Bank Check	Misc. Receip ts	& Hopper Fills	Payouts & Purchase	Tickets as Tips, Paid Unredeemed Tickets	Table Fills & Initial Fills	Bank Checkouts	Patron Withdrawals & Other Dept. Payouts	Misc. Payouts	Deposits	Lic. Name		Errors Properly Corrected	Date; Shift	Cashier	Accounting	Doc tested - No Except.	Comments
Follow- up																							

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an "A" in lower right corner of box if accounting did detect the non-compliance issue

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
# of exceptions noted at follow-up:	

D :		20	· ~ ·	ŕ
Decem	ner	21	12.0	

LICENSEE NAME:	D_{A}	ATE:	ATTACHMENT C
SLOT MACHINES			

JACKPOT PAYOUT/FILL SLIP - SLOTS COMPLIANCE ATTRIBUTE WORKSHEET

	A*											В*			SIGNA	ATURES	S B*			В*	C*	
Date	Slip#	Lic. Name	Xaction Type	Time	Shift	Mach#	Coins Played	W-2G	Gsmble Intercept	xaction	Copies	Sequence of Slips Proper	If Void Correct?	on	Patron if \$1200 >		Slot Emp. on all 3	Large JP App	Reel Set	Meters	Doc. Tested & No Exceptions	Comments
Follow-up	,																					

lower right corner		

A* Indicate actual information.

 $B^{*} \ \ If attribute is present, no indication is necessary; checkmarks indicate non-compliance. \\ C^{*} \ \ If no exceptions were noted, place an "X" here.$

Note: Count one slip/form as an item.	If more than one attribute on the slip/form is ou						
of compliance, only count it as one item out of compliance.							

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
# of exceptions noted at follow-up:	

LICENSEE NAME:	DATE:	ATTACHMENT D

DROP AND COUNT SLOT SUMMARY REPORT COMPLIANCE ATTRIBUTE WORKSHEET

A*		B*										SIGNATURES B*							B*			C*						
	Lic. Name	Game Date	Beg Time	End Time	Mach#	Mach	Count/ Weigh by Mach	\$ Amt by Mach	Denom Sub- totals	Coin/ Token Total		Ticket & Coupon Total	Grand Total	Var Wrap Amt	Net to Cashier	Test	Count Team Leader (twice)	Cashier	Rec.	Count Team Member	Acct Sig	Tester 1	2	Drop Agrees to DCS	Acct Review	Proper	Doc Tested- No Excep	Comments
Follow-up																												

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

If the licensee uses a scale tape to record per machine counts, use this attribute sheet to test the scale tape.
Place an "A" in lower right corner of the box if accounting did detect the non-compliance issue

A* Indicate actual information.	# of items reviewed (total of column A):
B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.	# of exceptions noted (items out of compliance):
C* If no exceptions were noted place an "X" here	# of exceptions noted at follow-up:

LICENSEE NAME:	D A	ATE:	ATTACHMENT E

DROP AND COUNT

BILL VALIDATOR SUMMARY COMPLIANCE ATTRIBUTE WORKSHEET

A *	B*										SIGNATURES B*						C*				
Count Date	Gaming Date	Beg Time	End Time	Grand Total Dollar Amt	Lic. Name	Mach #	Mach Denom	Dollar Amts by Denom	Total Dollar Amt	Total Ticket /Coup Amt	Count/ Sort Test Compl	Errors Prop. Corr.	Count Team Leader	Count Opener	Count Recorder	Acct. Review Sig.	Cert. by Team Lead	Cert. by Cash	Sig. of Testers Bill/TITO	Doc. tested – no exceptions	Comments
Follow - up																					

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an "A" in lower right corner of box if accounting did detect the non-compliance issue

A* Indicate actual information.

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

C* If no exceptions were noted, place an "X" here.

of items reviewed (total of column A):

of exceptions noted (items out of compliance):

LICENSEE NAME:	_DATE:	ATTACHMENT F	

DROP AND COUNT

COUNT (WEIGH)/WRAP VARIANCE REPORT COMPLIANCE ATTRIBUTE WORKSHEET

A *	B*						SIGNATURES B*						В*		C *	
Count Date	Total Weigh	Total Wrap	Var	Weigh by Denom.	by	Large Var. Explained	Team Leader	Recorder	Team Mbr	Cashier	Acctg	Lic. Name	Errors Corr. Properly	Count Date	Doc. Tested - No Excep.	Comments
Follow-Up																
ronow-Up																

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an	"Δ " in	lower right corner	of the hov if	eccounting did de	tect the non-c	amnliance issu

A* Indicate actual information.	
---------------------------------	--

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

C* If no exceptions were noted, place an "X" here.

of items reviewed (total of column A):

of exceptions noted (items out of compliance):

LICENSEE NAME:	DAT	E: ATTACHMENT G	

SLOT MACHINES

METER READING SUMMARY COMPLIANCE ATTRIBUTE WORKSHEET

	A*									COMPLE	ETED PROPER B*	RLY?								ATURES B*	OTHER B*	C*	
Date	Time	Lic Name	Mach #	Coin -In	Coin -Out	Coin Drop	Bill In	Attd Pd Jackpot	Attd Pd Prog Payout	Attd Pd CC	Mach Pd Prog Payout	Voucher Out	Voucher In	CEP-In	NCEP-In	NCEP-Out	Mach Pd Exter Bonus	Attd Pd Exter Bonus	Meter Reader	Acct. Review	Errors Prop. Correct	Doc Tested - no excep	Comments
Follo	w-Up																						

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

	Place an "A" in l	lower right corner	r of hoy if accou	nting did dete	ct the non-cor	nnliance isc
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A* Indicate actual information.

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

of items reviewed (total of column A):
of exceptions noted (items out of compliance
of exceptions noted at follow-up:

Davigad	Mariam	han	2022

LICENSEE NAME:	DATE:	ATTACHMENT I

SOFT COUNT CARD COMPLIANCE ATTRIBUTE WORKSHEET

	A*			COUN	T CARD	COMPLE B*	TED PRO	PERLY?			OTHER B*		C*	
Date	Table #	Shift	Lic. Name	Game	# of Chips by Denom	Dollar Amount by Denom	Coupons indicated on card	Tickets Mobile ATM Receipts on card	Grand Total	Addition	Errors Properly Corrected	Rec. Sig.	Doc. Tested & no Exception	Comments
Follow-up														

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an "A" in I	lower right corner o	it the box if accountin	ig did detect the non-co	mpliance issu

A* Indicate actual information.

 $B^{\color{red} *}$ If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

C* If no exceptions were noted, place an "X" here.

of items reviewed (total of column A):	
of exceptions noted (items out of compliance):	
of exceptions noted at follow-up:	

December 2020

LICENSEE NAME:	DATE:	ATTACHMENT J

REQUEST FOR FILL/CREDIT SLIP COMPLIANCE ATTRIBUTE WORKSHEET

A	\ *		SLII	P IS I	PROF	PERI	у с	OMPL	ETED	F	3 *	ОТІ	HER	B*	SIG	NATUF	RES B*	C*	
Date	Req. Slip#	F/C Checked	Lic. Name	Date	Time	Shift	Game	Table #	\$ Amt by Denom	Grand Total	If Void- Correct?	Req. Agrees to F/C Slip?	Both Copies Match?	Addition		Runner on both	on white	Doc Tested - No Excep	Comments
Follow-Up																			

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an "A" in lower right corner of box if accounting did detect non-compliance issue

A* Indicate actual information.

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

f of items reviewed (total of column A):	-
of exceptions noted (items out of compliance):	
of exceptions noted at follow-up:	

NAME: DATE: ATTACHMENT	DATE: ATTACHMENT K
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FILL/CREDIT SLIP COMPLIANCE ATTRIBUTE WORKSHEET

A	*	SLIP IS PROPERLY COMPLETED B*											THER			SIGN	ATURES	S	C*	
Date	Slip#	F/C Lic. Date Time S Checked Name			Shift		Table #	\$ Amt	Grand Total	If Void- Correct?	Req. Agrees to	B* All 3 Copies	Addition	Signer	Runner on all 3	B* Cashier on all 3	on	Tested -	Comments	
									Denom			F/C Slip?	Match?		on white			white	No Excep	
Follow-up																				

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an "A" in lower right corner of box if accounting did detect non-compliance issue

- A* Indicate actual information.
- B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.
- C* If no exceptions were noted, place an "X" here.

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
# of exceptions noted at follow-up:	

LICENSEE NAME:	DATE:	ATTACHMENT L
EICENSEE WARE.		

TABLE GAMES OPENER/CLOSER COMPLIANCE ATTRIBUTE WORKSHEET

A	A* SLIP IS PROPERLY COMPLETED B*							B*		0	THER B*				TURES 3*	C*	
Date	Slip#	Open/ Close	Lic. Name	Time	Game Descrip	Table No.	Dollar Amt. by Denom	Grand Total	Errors corrected properly	Voided Correctly (if applic.)	Opener agrees to prev closer	Closer agrees to sub opener	Additio n correct	Off- Going Top Signer or Dealer ¹	On- Coming Top Signer or Dealer	Doc. Tested & No Exceptions	Comments
Follow-																	
Up																	

¹ At the beginning of the day shift and the closing of the swing shift, the opener/closer inventory form may be signed by the off-going pit supervisor and either the on-coming pit supervisor or another licensed employee.

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an "A	A" in	lower right	t corner of th	ie box it	accounting d	lid detect i	the non-com	oliance issue

A*	Indicate	actual	information.

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
# of exceptions noted at follow-up:	

LICENSEE NAME:	DATE	:: ATTACHMENT M

REQUEST FOR TABLE GAMES JACKPOT PAYOUT SLIP COMPLIANCE ATTRIBUTE WORKSHEET

A	*	SLIP IS PROPERLY COMPLETED B*											OTHER B* SIGNATURES B*						B*	C*	
Date	Req. Slip#	Type of JP box checked	Name	Time		Wager Amount	Game	Table #	Player Spot	Hand	Cards	Amt. Awarded	If Void- Correct?	Req. Agrees to J/P Slip?	Both Copies Match?	Top Signer on both	Runner on both	Gamg Mgr if \$5000 or >	Dealer on white	Doc Tested - No Excep	Comments
																				•	
Follow-Up																					

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an "A" in lower right corner of box if accounting did detect the non-compliance issue

A* Indicate actual information.

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
# of exceptions noted at follow-up:	

LICENSEE NAME:	DATE:	ATTACHMENT N

TABLE GAMES JACKPOT PAYOUT SLIP COMPLIANCE ATTRIBUTE WORKSHEET

	A*													B*						SI	GNAT	URES 1	B*		C*	
Date	Slip#	Name	Type of JP box checked	Time	Shift	Game	Table#	Player Spot	Wager	W-2G	Hand	Cards		Gambling Intercept	All 3 Copies Match	Sequence of Slips Proper	Math OK	Correct?	Cash. on all 3	Patron on white	Top Signer on white	on all 3	on	\$5,000	Doc. Tested & No Exceptions	Comments
Follow-Up																										

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an "A" in lower right corner of box if accounting did detect non-compliance issue

A* Indicate actual information.

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
# of exceptions noted at follow-up:	

LICENSEE NAME:	DATE:	ATTACHMENT O

POKER JACKPOT COUNT CARD COMPLIANCE ATTRIBUTE WORKSHEET

	A *			COUNT CARD COMPLETED PROPERLY? B*									OTHER SIGNATURES B*						
Count Date	Table #	Shift	Lic. Name	Gaming Date	Name of Game/ JP	# of Chips by Denom	Dollar Amount by Denom	Total	Previous Liability	Increase (Total from Above)	Compare to JP Log	Current Liability	Addition	Errors Proper. Correct	Recorder	Person Updating Liab	Acctg	Doc. Tested & no except.	Comments
Follow-Up																			

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an "A" in lower right corner of box if accounting did detect the non-compliance issue

- A* Indicate actual information.
- B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.
- C* If no exceptions were noted, place an "X" here.

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
# of exceptions noted at follow-up:	

LICENSEE					ATTACHMENT P									
	ACCOUNTING Drop Report Variance Investigations and Explanations Compliance Attribute Worksheet													
Бтор геер		A*	gations an	u Bapiu	nations	Accou	xplanations	C*	Comments					
							B*		E	*				
Gaming Date for Drop Report	Date Drop Report Created	Date Accounting Sent Variances To Slots	Date Slots Returned Var Investigations To Accounting	Forward to Slot Dept. in a timely manner?	Returned To Acct Dept. in a timely manner?	Acct. identified all variances of 2% & \$25?	Slots investigated all variances sent by Acct.?	Repetitive Variances Identified?	Repetitive Variances resolved?	Procedures used to investigate variance documented?	Result of investigation documented?	Doc. Tested With No Exception		
Follow-Up														

A*	Indicate	actual	infor	mation
2 L	marcacc	actuai	mioi	manon.

Note:	Count	one	slip/form	as	an	item.	If	more	than	one	attribute	on	the
lip/fori	n is out	of co	ompliance,	on	ly c	ount it	as e	one ite	m out	of co	ompliance.		

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
of exceptions noted at follow-up:	

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

C* If no exceptions were noted, place an "X" here.

LICENSEE NAME:	DATE:	ATTACHMENT R

ACCOUNTING

Jackpot Report Variance Investigations and Explanations Compliance Attribute Worksheet

				nting & Slots		Variance E	xplanations	C*	Comments				
				B*						Е	3 *		
Gaming Date for Jackpot Report	Date Jackpot Report Created	Date Accounting Sent Variances To Slots	Date Slots Returned Var Investigations To Accounting	Forward to Slot Dept. in a timely manner?	Returned To Acct Dept. in a timely manner?	Acct. identified all variances of 1% & \$10?	Slots investigated all variances sent by Acct.?	Repetitive Variances Identified?	Repetitive Variances resolved?	Procedures used to investigate variance documented?	Result of investigation documented?	Doc. Tested With No Exception	
Follow-Up													

	Note: Count one sup/form as an item. If more than one attribute on the
	slip/form is out of compliance, only count it as one item out of compliance.
Indicate actual information.	# of items reviewed (total of column A):

Indicate actual information.	# of items reviewed (total of column
------------------------------	--------------------------------------

of exceptions noted (items out of compliance):
of exceptions noted at follow-up:

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

C* If no exceptions were noted, place an "X" here.

LICENSEE NAME:			DATE:							ATTACHMENT S			
ACCOUN Ticket Ou		e Investiga	ations and l	Explana	ntions Co	ompliance	Attribute	Workshe	et				
		A*					nting & Slots	· · · · · · · · · · · · · · · · · · ·		Variance E	xplanations	C*	Comments
							B*			B*			
Gaming Date for Report	Date Report Created	Date Accounting Sent Variances To Slots	Date Slots Returned Var Investigations To Accounting	Forward to Slot Dept. in a timely manner?	Returned To Acct Dept. in a timely manner?	Acct. identified all variances of 1% & \$10?	Slots investigated all variances sent by Acct.?	Repetitive Variances Identified?	Repetitive Variances resolved?	Procedures used to investigate variance documented?	Result of investigation documented?	Doc. Tested With No Exception	
Follow-Up													

A* Indicate actual information.

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

C* If no exceptions were noted, place an "X" here.

Note:	Count	one slip/form	as an	item.	If more	than	one	attribute	on	the
lip/for	m is out	of compliance	, only o	count it	as one ite	m out	of co	mpliance.		

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
of exceptions noted at follow-up:	

LICENSEE NAME:					DATE:							ATTACHMENT T		
ACCOUN Ticket In		Investigati	ions and Ex	xplanati	ons Con	ipliance A	Attribute W	orksheet						
		A*		Accounting & Slots B*						Variance Explanations B*		C*	Comments	
Gaming Date for Report	Date Report Created	Date Accounting Sent Variances To Slots	Date Slots Returned Var Investigations To Accounting	Forward to Slot Dept. in a timely manner?	Returned To Acct Dept. in a timely manner?	Acct. identified all variances of 1% & \$10?	Slots investigated all variances sent by Acct.?	Repetitive Variances Identified?	Repetitive Variances resolved?	Procedures used to investigate variance documented?	Result of investigation documented?	Doc. Tested With No Exception		
Follow-Up														

A*	Indicate	actual	infor	mation
2 L	marcacc	actuai	mioi	manon.

Note:	Count one slip/form as an item.	If more than	one attribute on the						
slip/form is out of compliance, only count it as one item out of compliance.									
	# of items reviewed (total of column A):								

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
f of exceptions noted at follow-up:	

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

C* If no exceptions were noted, place an "X" here.

LICENSEE NAME:	DATE:	ATTACHMENT U
TCENGEE WINE.		

ACCOUNTING

Theoretical Hold Report Variance Investigations and Explanations Compliance Attribute Worksheet

A*		Accounting & Slots						Variance Explanations		C*	Comments		
				B*					В*				
Gaming Month for Hold Report	Date Hold Report Created	Date Accounting Sent Variances To Slots	Date Slots Returned Var Investigations To Accounting	Forward to Slot Dept. in a timely manner?	Returned To Acct Dept. in a timely manner?	Acct. identified all variances according to accounting plan?	Slots investigated all variances sent by Acct.?	Repetitive Variances Identified?	Repetitive Variances resolved?	Procedures used to investigate variance documented?	Result of investigation documented?	Doc. Tested With No Exception	
Follow-Up													

A*	Indicate	actual	inf	ormation.

Note:	Count on	e slip/form a	s an item.	If more than	ı one attribute	on the
slip/for	m is out of	f compliance	only coun	it it as one iter	n out of comp	liance.

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
of exceptions noted at follow-up:	

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

C* If no exceptions were noted, place an "X" here.

LICENSEE NAME:	DATE:	ATTACHMENT V

MASTER GAMES SHEET COMPLIANCE ATTRIBUTE WORKSHEET

A				ING			B*				S		TURI B*	ES						В*			C*			
Date Counted	Shift	Closers	Drop	Credit	Fills	Openers	Lic. Name	Math	Drop Incl Coup	AGP	Rec	TL	TM	TM	Cash	Ver	Tester 1	Tester 2	Gaming Date	Beg. Time	Acctg. use	Count/ sort Test Compl.	Agrees	ALL amounts agree to MGSR	Doc Tested- No Except.	Comments
Follow-Up																										

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an "A" in lower right corner of the box if accounting did detect the non-compliance issue

- A* Indicate actual information.
- B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.
- C* If no exceptions were noted, place an "X" here.

4	of items	reviewed	(total of	column A):
и	. c	4: 4-	1 (:4		11

of exceptions noted (items out of compliance):

LICENSEE NAME:	DATE	: ATTACHMENT W
		/

DROP AND COUNT

KIOSK COUNT SUMMARY COMPLIANCE ATTRIBUTE WORKSHEET

A*							В*								SI	GNATURES B*	S			C*	
Count Date	Gaming Date	Beg Time	End Time	Grand Total Dollar Amt	Lic. Name	Mach #	Mach Denom	Dollar Amts by Denom	Total Dollar Amt	Total Ticket /Coup Amt	Count/ Sort Test Compl.	Errors Prop. Corr.	Count Team Leader	Count Opener	Count Recorder	Acct. Review Sig.	Cert. by Team Lead.	Cert. By Cash	Sig. of Testers Bill / TITO	Doc. tested - no exceptions	Comments
Follow- up																					

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an "A" in lower right corner of box if accounting did detect the non-compliance issue

A* Indicate actual information.

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

C* If no exceptions were noted, place an "X" here.

of items reviewed (total of column A):

of exceptions noted (items out of compliance):

LICENSEE NAME: _	DATE:	ATTACHMENT X

TABLE GAMES PAYOUT FORM COMPLIANCE ATTRIBUTE WORKSHEET

	A*		В*																SIG	NATURES	B*	C*	
Date	Slip#	Name	Type of Box Checked	Game Listed If Applicable		Shift	Table#	Player Spot	Desc of Prize	\$ Value of Prize	Fed Tax Withheld	State Tax Withheld	Gambling Intercept	All Copies Match	Sequence of Slips Proper	If Void Correct?		Top Signer	Verifier	Cashier	Accounting verification	Doc. Tested & No Exceptions	Comments
Follow-Up								_		_			_	_			_		_	_			

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an "A" in lower right corner of box if accounting did detect non-compliance issue

A* Indicate actual information.

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
# of exceptions noted at follow-up:	_

	A*										B*					SIGNAT	URES B*		C*	
	Type Of Tournament	Lic. Name	Date of Tournament	Lic Responsible for Tournament	Tournament Desc	Patron Name		Add'l Buy-In	Total Patron Paid Cash Collected	Total Non- Cash	Totals Counted	Variance	Math OK	If Void Correct?	Top Signer	Cashier Signature	Independent Verifier	Accounting Signature & Date	Doc. Tested & No Exceptions	Comments
_																				
Up																				

A* Indicate actual information.

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

C* If no exceptions were noted, place an "X" here.

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
# of exceptions noted at follow-up:	

LICENSEE NAME:	DATE:	 ATTACHMENT Z

TABLE GAMES TOURNAMENT ENTRY FEE & BUY-IN LOG COMPLIANCE ATTRIBUTE WORKSHEET

	A*												B*				SIGNAT	URES B*		C*	
Date	Type Of Tournament	Lic. Name	Date of Tournament	Shift	Tournament Desc	Patron Name	Entry Fee	Initial Buy-In	Add'l Buy-In	Total Patron Paid Cash Collected	Total Comped	Total Non- Cash	Totals Counted	Variance	If Void Correct?	Top Signer	Cashier Signature	Independent Verifier	Accounting Signature & Date	Doc. Tested & No Exceptions	Comments
Follow-Up																					
			_							_		_	_			_	_				

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

Place an "A" in lower right corner of box if accounting did detect non-compliance issue

A* Indicate actual information.

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

# of items reviewed (total of column A):	
# of exceptions noted (items out of compliance):	
f of exceptions noted at follow-up:	

LICENSEE NAME:	DATE:	

POKER POKER BANK EXCHANGE FORM COMPLIANCE ATTRIBUTE WORKSHEET

A*					B*					C*	
Date	Licensee Name	Date	Bank #	Time	Amt. from Poker (Math)	Amt. To Poker (Math)	Top Signer Signature	Runner Signature	Cashier Signature	Doc. Tested No Except.	Comments

Place an "A" in	lower right corner	of how it account	na did detect the noi	n_complianca icciia

A* Indicate actual information

B* If attribute is present no indication is necessary, checkmark indicates non-compliance

C* If no exceptions were noted place an "X" here.

Note:Count one slip/form as an item.	If more than one attribute on the
slip/form is out of compliance, only co	ount it as one item out of compliance

of exceptions noted (items out of compliance):

#	of	excep	tione	noted	at	follo	٦_	ıın	
#	OΙ	excep	แบบเร	notea	aı	IOII	JW-	uυ	

ICENSEE NAI	ME:	DATE:															
ACCOUNTING	OT REVEN	UE SUMI	MARY RE	PORT CO	MPLIANCE	ATTRIBUT	E WORKS	HEET									
A*									B*							C*	
Date	Licensee Name	Report Period Date	Prepared Date Prepared by Prepared on report. All denoms on floor are on report. Compare Rpt. Co									Doc. Tested No Except.	Comments				
Place an "A" in lowe		of box if ac	counting did	detect the no	on-compliance is	ssue							than one attribute of one item out of co				
* Indicate actual information * If attribute is present no indication is necessary, checkmark indicates non-compliance * If no exceptions were noted place an "X" here.								# of items reviewed (total column A): # of exceptions noted (items out of compliance): # of exceptions noted at follow-up:									
January 31, 2014																	

LICENSEE NAME:	DATE:	
ACCOUNTING TABLE GAMES MASTER GAMES SUMMARY REPORT COMPLIANCE ATTRIBUTE WORKSHEET		

A*		B* C*												
Date	Licensee Name	Game	Day	Closers	Drops	Credits	Openers	Fills	Hand Paid Jp	Net Win	Hold %	Math to Tax Return	Doc. Tested No Except.	Comments

Dlace a	n "Δ"	'in	lower	riaht	corner	_∩f	hov if	accounting	hih r	datact	the	non	comi	alianca	icent
i iauc a		1111	IOMEI	Hym	COLLICI	UI	DOV II	accounting	4 ulu	ucicui	uic	11011	COIII	Jiiai icc	133U

A* Indicate actual information

B* If attribute is present no indication is necessary, checkmark indicates non-compliance

C* If no exceptions were noted place an "X" here.

Note:Count one slip/form as an item.	If more than one attribute on the
slip/form is out of compliance, only co	ount it as one item out of compliance

# 01	itame	reviewed	(total	column	Δ١

of exceptions noted (items out of compliance):

		Attachment d
LICENSEE NAME:	DATE:	

ACCOUNTING

TABLE GAMES STATISTICAL REPORT COMPLIANCE ATTRIBUTE WORKSHEET

A*					B*				C*	
Date	Licensee Name	Game Type	MTD Drop	MTD AGP	Hold %	Hold% Variance Identified	Expected Hold Defined in WAP	Variance Explanation Adequate	Doc. Tested No Except.	Comments

A* Indicate actual information

B* If attribute is present no indication is necessary, checkmark indicates non-compliance

C* If no exceptions were noted place an "X" here.

Note:Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.

of items reviewed (total column A):
of exceptions noted (items out of compliance):
of exceptions noted at follow-up:

LICENSEE NAME:	DATE:	
TABLE CAMES		

TABLE GAMES TABLE GAMES ACTIVITY LOG COMPLIANCE ATTRIBUTE WORKSHEET

A*				В*					C*	
Date	Licensee Name	Date	Game Type	Table #	Time	Shift	Pit Boss	Event	Doc. Tested No Except.	Comments

Place an "A" in lower right corner of box if acc	collinting did detect the non	-compliance issui

Note:Count one slip/form as an item.	If more than one attribute on the
slip/form is out of compliance, only co	ount it as one item out of compliance

of items reviewed (total column A):
of exceptions noted (items out of compliance):
of exceptions noted at follow-up:

A* Indicate actual information

B* If attribute is present no indication is necessary, checkmark indicates non-compliance

 C^{\star} If no exceptions were noted place an "X" here.

LICENSEE NAME:	DATE:	ATTACHMENTf

ACCOUNTING

Cashable Electronic Promotion In (CEP-In) Report Variance Investigations and Explanations Compliance Attribute Worksheet

A*						nting & Slots	<u> </u>	Variance Explanations		C*	Comments		
		B*						E	3 *				
Gaming Date for CEP In Report	Date CEP In Report Created	Date Accounting Sent Variances To Slots	Date Slots Returned Var Investigations To Accounting	Forward to Slot Dept. in a timely manner?	Returned To Acct Dept. in a timely manner?	Acct. identified all variances of 1% & \$10?	Slots investigated all variances sent by Acct.?	Repetitive Variances Identified?	Repetitive Variances resolved?	Procedures used to investigate variance documented?	Result of investigation documented?	Doc. Tested With No Exception	
Follow-Up													
- 3.00. ep													

Mata	Count one clin/form or on item	If more than one attribute on the sl	in/form is out of comm	liance only count it as a	no item out of compliance
note:	Count one sup/form as an item.	II more man one attribute on the si	ip/iorin is out of comp	mance, omy count it as o	me item out of compliance

A* Indicate actual information.

of items reviewed (total of column A):

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

of exceptions noted (items out of compliance):

C* If no exceptions were noted, place an "X" here.

Non-Cashable Electronic Promotional In A*							nting & Slots	Variance E	xplanations	C*	Comments		
				B*							B*		
ming Date NCEP-In eport	Date NCEP- In Report Created	Date Accounting Sent Variances To Slots	Date Slots Returned Var Investigations To Accounting	Forward to Slot Dept. in a timely manner?	Returned To Acct Dept. in a timely manner?	Acct. identified all variances of 1% & \$10?	Slots investigated all variances sent by Acct.?	Repetitive Variances Identified?	Repetitive Variances resolved?	Procedures used to investigate variance documented?	Result of investigation documented?	Doc. Tested With No Exception	
low-Up													

of exceptions noted at follow-up:

B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.

C* If no exceptions were noted, place an "X" here.

LICENSEE NAME:	DATE:	ATTACHMENT h
ACCOUNTING Non-Cashable Electronic Promotion Out (NCEP-Out) Report Variance Investig	gations and Explanations Compliance Attribu	ıte Worksheet

A*				Accounting & Slots							Variance Explanations		Comments
						B*							
Gaming Date for NCEP- Out Report	Date NCEP- Out Report Created	Date Accounting Sent Variances To Slots	Date Slots Returned Var Investigations To Accounting	Forward to Slot Dept. in a timely manner?	Returned To Acct Dept. in a timely manner?	Acct. identified all variances of 1% & \$10?	Slots investigated all variances sent by Acct.?	Repetitive Variances Identified?	Repetitive Variances resolved?	Procedures used to investigate variance documented?	Result of investigation documented?	Doc. Tested With No Exception	
Follow-Up													

Note: Count one slip/form as an item. If more than one attribute on the slip/form is out of compliance, only count it as one item out of compliance.								
A* Indicate actual information.	# of items reviewed (total of column A):							
B* If attribute is present, no indication is necessary; checkmarks indicate non-compliance.	# of exceptions noted (items out of compliance):							
C* If no exceptions were noted place an "X" here	# of exceptions noted at follow-up:							