



STATE OF WASHINGTON

GAMBLING COMMISSION

"Protect the Public by Ensuring that Gambling is Legal and Honest"

HOUSE-BANKED CARD ROOM RECORDS

Dear Class HB Card Room Licensees:

WAC 230-15-190 requires the Commission to provide each licensed card room operator with a sample packet of daily records. These daily records must be completed daily. If there is no activity on a day, only the *Master Games Report* (GC2-263) needs to be completed indicating there was no activity. Attached are the records in the prescribed format, instructions, and a document flow chart to assist you in completing the required records.

New card room operators should contact their local county or city treasurer for details regarding taxation of authorized gambling activities within your particular area, as set forth in RCW 9.46.110. Most jurisdictions require some type of registration prior to commencement of your gambling activity(ies).

If you have a question or need assistance, please call the Gambling Commission office in your area:

Lacey Headquarters (360) 486-3440

Spokane (509) 325-7900

Attachments



STATE OF WASHINGTON

GAMBLING COMMISSION

"Protect the Public by Ensuring that Gambling is Legal and Honest"

TO: Card Room Licensees

SUBJECT: RESPONSIBILITY TO REPORT

Your Responsibility to Report Illegal Activity

It is your responsibility as a licensee to report and stop illegal activities. If you observe or suspect such activities occurring at your premises or any other location, please contact our nearest field office or report online at www.wsgc.wa.gov by clicking on the link "Report a Violation" and we will investigate the matter.

Self Reporting Violations

We will not bring administrative charges against a licensee that reports a violation to commission staff within 24 hours of finding it unless the director determines there are extenuating circumstances. You may accomplish this by leaving a voice or email message with the area agent and immediately correct the violation. If we determine the violation cannot be immediately corrected, you must submit a plan to correct the violation by a date agreed to by us. This section does not apply if you engaged in criminal activity or we find the violation before you report it.

Ongoing Investigations and Possible Penalties

We will aggressively pursue any suspected bookmaking or other illegal activities, and we will work closely with local law enforcement to end those activities.

If you or your employees are involved in any illegal activities or allow them to continue at your business, we will have no choice but to take appropriate actions. These actions may result in the loss of your license(s) and criminal prosecution.

Monitoring Compliance Through Unannounced Visits

Our agents will continue to make announced and unannounced visits to licensed premises to monitor compliance with our rules and regulations.

Our mission is to keep gambling legal and honest. Thank you for your cooperation in helping us meet that mission.

We look forward to continuing to work with you in the future. Together, we can provide an operating environment that promotes the highest possible level of integrity for authorized gambling activities and discourages illegal activities.

HOUSE BANKED CARD ROOM

****INSTRUCTIONS****

A. FILL AND CREDIT REQUEST FORM (GC2-257)

This form is used:

- 1) By the floor supervisor to request the cashier to complete a fill slip for the distribution of gaming chips and coins from the cashier's cage to a gaming table, or
- 2) By the floor supervisor to request the cashier to complete a credit slip for the distribution of gaming chips and coin from a gaming table to the cashier's cage.

Fill and Credit Request Form must be a two-part form. This form is prepared by the Floor Supervisor. To complete this form, record:

- Date
- Time
- Game or Table Number
- Whether it is a Fill or Credit
- Request amount of each chip/coin denomination
- Total chip/coin amount

Floor Supervisor and Security sign the form*. Security delivers the original to the cashier's cage. Dealer places the duplicate copy face up on the gaming table. Once the fill/credit is complete, the Dealer places the duplicate Fill/Credit Request Form in attached drop box. The Cage Cashier includes the original form in the daily records and forwards them to the accounting department.

NOTE: * If performing a Credit, the dealer also signs the form.

B. FILL / CREDIT SLIP (GC2-258)

This form is used whenever gaming chips or coins are:

- 1) Distributed to a gaming table from the cashier's cage (Fill), or
- 2) Removed from a gaming table and transported to the cashier's cage (Credit).

Fill/Credit Slips must be a three-part form and consecutively pre-numbered. This form is prepared by the Cage Cashier. To complete this form, record:

- Whether it is a Fill or Credit
- Date
- Time
- Game or Table Number
- Chip/coin denomination
- Quantity of chips/coin*
- Chip amount
- Add the chip/coin amounts to get a Total**

Cage Cashier signs the form verifying the information. Security verifies, signs, and transports original and duplicate copies to gaming table.

Dealer and Floor Supervisor verify the amount and sign the form. Dealer places duplicate copy in attached drop box.

Security returns the original copy to the cashier. The cage cashier includes the form in the daily records and forwards them to the accounting department.

NOTE: * It is optional to fill out the quantity column

** The total amount of the Fill/Credit is also written in big bold numbers in the “memo” section

C. TABLE INVENTORY SLIP (GC2-259)

This form is used to account for chips and coin stored at gaming tables.

Table Inventory Slip must be a three-part form and consecutively pre-numbered. This form is prepared by the Floor Supervisor when they close a gaming table. To complete this form, record:

- Date
- Time
- Game or Table Number
- Quantity of each chip/coin denomination*
- Total amount of each chip/coin denomination
- Add the chip/coin amounts to get a Total

Closing Floor Supervisor and Closing Dealer sign the form verifying the information. Dealer places original copy (Closer) in attached drop box. Dealer places the duplicate copy (Opener), face up, in the chip tray. Security transports the triplicate copy to the accounting department.

When the table is opened, the Opening Floor Supervisor and Opening Dealer sign the duplicate copy (Opener) verifying the information. Dealer places the duplicate copy in the attached drop box.

NOTE: If a discrepancy is noted on the Opener, the Floor Supervisor must complete and sign a **Notification of Error Slip (GC2-262)**.

If an error is made when filling out the Closer, the Floor Supervisor must write “Void” on all copies and forward them to the accounting department.

* It is optional to fill out the quantity column

D. SOFT COUNT DROP (GC2-260)

This form is used to record and reconcile the total amount of cash received from all drop boxes counted in the count room.

For counting purposes, currency will be separated as follows:

Denomination	Bills in a Clip	Clip Value	Clips in a Strap	Strap Value
\$ 1.00	25	\$ 25.00	4	\$ 100.00
5.00	20	100.00	5	500.00
10.00	25	250.00	4	1,000.00
20.00	25	500.00	4	2,000.00
50.00	20	1,000.00	5	5,000.00
100.00	25	2,500.00	4	10,000.00

This form is prepared by a member of the count team (Recorder). To complete this form, record:

- Date of the drop
- Total cash amount for each Strap, Clip and Loose bills
- Total amount of cash for each denomination
- Total cash amount for all Straps, Clips, Loose, \$2 bills, Mutilated, and Counterfeit
- Grand total of all cash

The Total Drop amount is taken from the **Master Games Report (GC2-263)**. This amount should equal the Grand Total amount.

The Recorder and Accounting/Cashier sign the form verifying the information. The original copy is forwarded to the accounting department. If a duplicate copy is used, forward it to the cashier's cage.

NOTE: The duplicate copy is optional

E. KEY CONTROL LOG (GC2-261)

This form is used to record the issuance of and return of all keys used to control restricted access areas by cardroom employees.

To complete this form, record:

- Key box
- Date
- Time key(s) were removed (signed out)
- Key number(s)
- Reason keys were removed
- Signature of authorized employee removing key(s)
- Employee number
- Time key(s) were returned (signed in)
- Signature of authorized employee returning key(s)
- Employee number

NOTE: A list of employees authorized to access keys must be listed on the bottom of this form or posted next to the key box.

F. NOTIFICATION OF ERROR SLIP (GC2-262)

This form is used to explain the reason the opening **Table Inventory Slip (GC2-259)** does not agree with the actual opening count.

Notification of Error Slip must be a two-part form. This form is prepared by the Floor Supervisor. To complete this form, record:

- Game or Table Number
- Date
- Time
- Detailed explanation of the reason why the actual opening table inventory does not match the Table Inventory Slip. It must also include the explanation of how the issue was resolved.

Floor Supervisor, Dealer, and Security sign the form verifying the information. Dealer places the original copy in the attached drop box. Security transports the duplicate copy to the accounting department or cashier's cage.

NOTE: Licensee must notify the WSGC within 24 hours of errors of two hundred dollars or more, or if there is a pattern of shortages (WAC 230-15-495).

G. MASTER GAMES REPORT (GC2-263 for house banked & GC2-263a for house banked & poker)

This form is used to record all activity at each gaming table to include the count of the contents of the drop boxes (Drop) and the calculation of the Win/Loss.

This form is prepared by a member of the count team (Recorder). To complete this form, record:

- Gaming date
- Game name
- Opener (A) is the opening chip and coin amount. This amount is taken from the opening **Table**

Inventory Slip (GC2-259).**

- Fill Series Number. Record the series number(s) from the **Fill Slip(s) (GC2-258)****.
- Fills (B) is the amount of chips and coin distributed to a gaming table. This amount is taken from the **Fill Slip(s) (GC2-258)****.
- Credit Series Number. Record the series number(s) from the **Credit Slip(s) (GC2-258)****.
- Credits (C) is the amount of chips and coin transferred to the cashier's cage. This amount is taken from the **Credit Slip(s) (GC2-258)****.
- Closer (D) is the closing chip and coin amount. This amount is taken from the closing **Table Inventory Slip (GC2-259)****.
- Total (E) is calculated by ($-- \text{Opener (A)} - \text{Fills (B)} + \text{Credits (C)} + \text{Closer (D)} = \text{Total(E)}$). This amount may be positive or negative.
- Drop (F) is the amount of currency counted from the drop box(s). This amount is taken from the **Soft Count Verification Sheet (GC2-283)**.
- Win/Loss (G) is calculated by ($\text{Total (E)} + \text{Drop (F)} = \text{Win/Loss (G)}$).*
- Win/Loss Percentage (H) is calculated by ($\text{Win/Loss (G)} \text{ divided by the Drop (F)} = \text{Win/Loss \% (H)}$)*

For Licensees conducting poker, record***:

- Amount of chips collected from the poker rake
- Amount of chips collected from the PSJ Drop

For Licensees who operate progressive games, complete the "Less Adjustments for Progressive Jackpots" section. If unsure about how to calculate this, contact your local gambling agent.

The rows and/or columns are then totaled.

Recorder, Counter 1, Counter 2, and Verifier sign the form verifying the information. The Verifier transports the Master Games Report, along with the Fill/Credit Request Form, Fill/Credit Slips, and Table Inventory Slips removed from the drop boxes, to the accounting department. Accounting signs this form verifying the information.

NOTE: * The accounting department may complete the Win/Loss portion of the Master Games Report.

** Prior to the count, the Cage Cashier may record the Opener (A), Fill Series Number(s), Fills (B), Credit Series Number(s), Credits (C), and Closer (D) on the Master Games Report. If they do, a count team member must verify all information is correct.

*** Licensees operating poker may adjust this form to reflect the correct number of house banked and poker tables.

H. CARD INVENTORY CONTROL LOG (GC2-264)

This form is used to control and track all decks maintained in inventory from the point of purchase to the point the decks are destroyed.

This form is prepared by Security. To complete this form, record:

- Date
- Number of decks signed in
- Number of decks signed out
- Balance, or remaining number of decks in inventory ($\# \text{ of Decks In } -- \# \text{ of Decks Out} = \text{Balance}$)

Security and Gaming sign the form verifying the information.

I. CAGE PAID IN / OUT (GC2-265)

This form is consecutively pre-numbered and used to record all additions or withdrawals of cash to/from the cashier's cage.

This form is prepared by the Cage Cashier. To complete this form, record:

- Whether it is a Paid In or Paid Out
- Date
- Time
- Transaction Amount
- Reason for the Paid In/Out
- Authorized By, is the signature of the individual approving the transaction*
- Paid By, is the signature of the individual paying the funds
- Received By, is the signature of the individual receiving the funds

NOTE: * Authorization is only need when conducting a Paid Out.
A separate form must be used for each transaction.

J. SAFE/VAULT INVENTORY (GC2-266)

This form is used to record the inventory of currency and chips stored in the safe/vault. This form must be completed anytime there is a change to the safe/vault inventory.

To complete this form, record:

- Date
- Time
- Amount of Currency Strapped and Loose/Clipped for each denomination
- Total amount of Currency Strapped and Loose/Clipped
- Amount of coin Rolled and Loose for each denomination
- Total amount of Coin Rolled and Loose
- Amount of Chips Racked and Loose for each denomination
- Total amount of Chips Racked and Loose
- Miscellaneous
- Actual Count is the total amount of Currency, Coin, Chips & Misc. in the Safe/Vault
- Previous Count is the amount of Currency, Coin, Chips, & Misc. from the last Inventory
- Increases are any Currency, Coin, Chips, & Misc. that have been added to the Safe/Vault
- Decreases are any Currency, Coin, Chips & Misc. that have been removed from the Safe/Vault
- Over/Short is the difference in the amount of Currency, Coin, Chips and/or Misc*.

Cage Cashier/Accounting and a witness sign the form verifying the information.

NOTE: * Licensee must provide an Explanation for all Over/Short

K. STRAP VARIANCE LOG (GC2-268)

This form is used to record any variances (over or short) in currency found in the cage.

This form is completed by the Cage Cashier. To complete this form, record:

- Month
- Year
- Date
- Amount Over/Short
- Roll/Strap I.D. Number and date. Include the names of the cage & count team member that conducted the count on that date.

The Cage Cashier reporting the strap variance signs the form verifying the information.

NOTE: This form is optional

L. RECONCILIATION DROP / DEPOSIT (GC2-269)

This form is used to record the reconciliation of the drop and deposit.

This form is prepared by Cage Casher/Accounting. To complete this form, record:

- Date
- Chip Inventory
 - Total PSJ Drop taken from the **Master Games Report (GC2-263)**
 - Total Poker Rake taken from the **Master Games Report (GC2-263)**
 - Total Chip Drop, (Total Chip Drop = Total PSJ Drop + Total Poker Rake)
 - Amount of chips going to Cage
 - Amount of chips going to the Vault
- Cash Soft Count Inventory
 - Cash Drop is the amount of cash received from the Drop recorded on the **Master Games Report (GC2-263)**
 - Cash Due Back to Cage (Cash Due Back to Cage = Due Back to Cage taken from the **Cage Inventory Count (GC2-281)** – Chips to Cage). If operating the cage on a float, amount of Cash to Cage.
 - Cash PSJ Deposit (Cash PSJ Deposit = Total PSJ Drop – PSJ Admin. Fee (up to 10%))
 - Cash Progressive Deposit (Deposit = Progressive Funds Collected – Prizes Paid Out) taken from the **Progressive Prize Fund Accrual Record (GC2-360)**
 - Any other cash
 - Cash Deposit Subtotal (Cash Deposit Subtotal = Cash Drop – Cash Due Back to the Cage (or Cash to Cage if on a float) – Cash PSJ Deposit – Cash Progressive Deposit +/- Other Cash)
 - Amount of Checks to be deposited
 - Deposit Total (Deposit Total = Cash Deposit Subtotal + Checks)*
- Due Back to the Cage
 - Due Back to the Cage is taken from the **Cage Inventory Count (GC2-281)**
 - Amount of Chips to the Cage
 - Cash Due Back to Cage (Cash Due Back to the Cage = Due Back to Cage – Chips to Cage)
- PSJ
 - Total PSJ Drop taken from the **Master Games Report (GC2-263)**
 - PSJ Administrative Fee, is the amount the licensee withholds for admin. costs. Can be up to 10% of the PSJ Drop.
 - Cash PSJ Drop (Cash PSJ Drop = Total PSJ Drop – PSJ Admin. Fee)

NOTE: * If Cash Deposit Subtotal is positive, add to Checks for Deposit Total
If Cash Deposit Subtotal is negative, no cash will be deposited, only checks. For Licensees operating the cage on an imprest, cash will be needed from the Vault/Safe/Bank.

NOTE: Licensees can make minor modifications to this form after receiving written approval from the WSGC. For example, house banked card room licensees not operating poker may delete the Chip Count Inventory and PSJ section.

M. EMPLOYEE SIGNATURE CARD (GC2-270)

This form is used to record card room employee's name and a sample of their signature and initials.

Employee Signature Card must be a two-part form. To complete this form, record:

- Full Name
- Department
- Employee number or Card Room Employee License number
- Employee Signature
- Employee Initials
- Date Employment was Started
- Date Employment was Terminated

The original copy of is maintained in the accounting department. The duplicate copy is maintained in the cashier's cage.

N. CAGE ACCESS LOG (GC2-271)

This form is used to record the access to specific areas within the house banked card room.

To complete this form, record:

- Date
- Name and Job Title
- Time In
- Purpose or reason for access
- Time Out

O. SAFE/VAULT ACCESS LOG (GC2-272)

See N above.

P. COUNT ROOM ACCESS LOG (GC2-274)

See N above.

Q. SURVEILLANCE ROOM ACCESS LOG (GC2-276)

See N above.

R. VISITOR ACCESS LOG (GC2-277)

This form is used to record the access to visitors (unauthorized individuals) into restricted areas of a house banked card room.

To complete this form, record:

- Date
- Name and Job Title
- Time In
- Purpose or reason for access
- Time Out

S. SENSITIVE FORM – RECEIVING CONTROL SHEET (GC2-278)

This form is used to track all pre-numbered forms used by the gaming operation.

This form is prepared by Accounting. To complete this form, record:

- Date
- Type of form
- Beginning Serial Number
- Ending Serial Number
- Location of where the forms are received from, transferred to, or stored in

T. DAILY RETURNED CHECK REPORT (NSF CHECK LOG) (GC2-280)

This form is used to record all player's checks that are returned to the licensee as Non-Sufficient Funds (NSF). This form is also a record of collections of those funds from the player.

This form is prepared by Accounting. To complete this form, record:

- Date check was written
- Check number

- Checking account number
- Amount check was written for
- Date the check was returned NSF
- Name of the Drawer on the check
- Date funds were collected
- Amount collected
- Date funds were deposited*

NOTE: * Any funds received from payment of NSF checks should be listed separately when deposited and deposited within 2 banking days.

U. CAGE INVENTORY COUNT (GC2-281)

This form is used to record and reconcile the total cage inventory at the end of each shift/day.

This form is prepared by the Cage Cashier. To complete this form, record:

- Amount of currency (bundled, loose and in total) for each denomination
- Amount of coin (rolled, loose, and in total) for each denomination
- Total Cash (Total Currency + Total Coin = Total Cash)
- Amount to chips (racked, loose, and in total) for each denomination
- Miscellaneous currency, coin, and/or chips (ex. safe, fill bank, etc)
- Total miscellaneous amount
- Checks on hand (personal, payroll, cash advance, other)
- Total checks
- Total Cage Bank = (Total Cash (1) + Total Chips (2) + Total Miscellaneous (3) + Total Checks (4))
- Decreases to the cage (fills, paid outs, other)
- Total decreases
- Increase to the cage (credits, paid ins, transfers, NSF check repayment, other)
- Total increases
- Due back to cage = Imprest Amount – Ending Bank (1+2+3) *
- Cage Inventory = Total Cage Bank (1+2+3+4) + Total Decreases (5) – Total Increases (6)
- Over/Short = Cage Inventory – Opening Bank

The Incoming Cashier, Outgoing Cashier, and Verifier sign this form verifying the information.

NOTE: * Licensees that maintain the cage at imprest are only required to complete the Due Back Calculation section at closing. Licensees that have received approval from the commission to use a float do not complete the Due Back Calculation section.

NOTE: Licensees can make minor modifications to this form after receiving written approval from the WSGC

V. HOUSE BANKED CARD ROOM MONTHLY INCOME SUMMARY (GC2-282)

This form is a monthly accounting of card room activity.

This form is prepared by Accounting. To completed this form record the month and year. The following information is taken from other records:

- Rake is taken from **Master Games Report (GC2-263)**
- PSJ Admin. Fees taken from **Reconciliation Drop/Deposit (GC2-269)**
- Tournament Entry Fees taken from **Card Tournament Summary (GC2-301)**
- House Bank Net Win/Loss taken from **Master Games Report (GC2-263)**
- Cash Over/Short taken from the **Cage Inventory Count (GC2-281)**

Total all columns.

NOTE: If charging by time/hand you will need to add an additional column

W. SOFT COUNT VERIFICATION SHEET (GC2-283)

This form is used to record the contents of each drop box after it is counted.

This form is completed by the Count Team. To complete this form, record:

- Date
- Game or table number
- Amount of currency for each denomination
- Amount of chips

Total all rows and columns. The totals from each drop box are entered as the Drop on the **Master Games Report (GC2-263)**

Counter 1, Counter 2, and the Recorder sign the form verifying the information.

X. SURVEILLANCE ACTIVITIES LOG (Part 1) (GC2-284)

This form is used to record surveillance activities. This form should be confidential and should be reviewed only by surveillance personnel and their superiors.

This form is completed by Surveillance. To complete the form, record:

- Date
- Person Conducting Surveillance
- Reason for conducting surveillance
- Time Begin
- Time End
- Result

If suspicious or illegal activity is detected, document when the WSGC was notified.

Y. SURVEILLANCE ACTIVITIES LOG (Part 2) (GC2-284a)

This form is used as an equipment Malfunction Log.

This form is completed by Surveillance. To complete this form, record:

- Date
- Description of Malfunction
- Date/Time Out of Service
- Date/Time In Service
- Date/Time WSGC was notified

Document when the digital system was remotely accessed for maintenance or repair.

Z. CARD DESTRUCTION LOG (GC2-285)

This form is used to record the destruction of decks of cards.

This form is prepared by Security. To complete this form, record:

- Date
- Number of decks destroyed

Security and Gaming sign this form verifying the information.

AA. CHIP DESTRUCTION LOG (GC2-286)

This form is used to record the destruction of damaged or mutilated chips.

This form is prepared by Accounting. To complete this form, record:

- Date chips were destroyed
- Chip denomination
- Number of chips

Accounting and Security sign this form verifying the information.

BB. INCIDENT REPORT (GC2-287)

This form is used to document reportable incidents that occurred on the licensed premises.

This form is prepared by Security and/or Surveillance. To complete this form, record:

- Name of individual involved in the incident
- Date and time
- Driver's License Number or Social Security Number
- Date of birth
- Current address
- Phone number
- Whether surveillance/security was notified
- If surveillance video was maintained
- Surveillance video start time
- Surveillance video stop time
- Type of incident
- Floor supervisor on duty
- Shift
- Game or table number
- Detailed description of the incident
- Date and time WSGC was notified

Security or Surveillance signs this form verifying the information.

NOTE: Licensees can make minor modifications to this form after receiving written approval from the WSGC.

CC. DEALER EVALUATION FORM (GC2-288)

This form is used by surveillance to conduct evaluations of dealers.

This form is prepared by Surveillance. To complete this form, record:

- Name of dealer evaluated
- Date and time of evaluation
- Name of Floor Supervisor
- Shift
- Evaluation start time
- Evaluation stop time
- Game or table number
- Number of decks used
- Table limit
- Number of hands observed
- Number of players at the table
- Players betting range
- Average shuffle time

- Number of mistakes
- Whether or not the dealer:
 - Properly shuffled
 - Properly cut the deck
 - Protected the deck
 - Used correct peek procedure
 - Showed felt between the cards
 - Spread players cards out
 - Followed take and pay procedures
 - Cleared hands
- Detailed comments/review of the dealers' evaluation

Surveillance signs this form verifying the information.

NOTE: Licensees can make minor modifications to this form after receiving written approval from the WSGC.

DD. CUSTOMER COMP LOG (GC2-289)

This form is used to record any complimentary (comps) item(s) provided to players by the licensee's employees.

To complete this form, record:

- Date
- Name of customer
- Address
- Phone number
- Employee authorizing comp
- Complimentary Item
- Value of complimentary item

NOTE: Licensees can make minor modifications to this form after receiving written approval from the WSGC

EE. CARD TOURNAMENT SUMMARY (GC2-301)

This form is used to record entry fees and winner's information on house banked and poker tournaments.

To complete this form, record:

Gross Gambling Receipts Computation:

- Entry Fees Collected taken from **Summary of Participants, Entry Fees, and Buy-Ins (GC2-302)**
- Fair market value of food and/or drink provided
- Total Tournament Entry Fees (Total Tournament Entry Fees = Entry Fees Collected – Food & Drink Provided)

Total Prizes Awarded:

- Total Buy-Ins taken from **Summary of Participants, Entry Fees, and Buy-Ins (GC2-302)**
- Total of additional prizes paid by the licensee
- Total Prizes Awarded = Total Buy-Ins + Total Prizes Paid by House

Winner's List:

- Winner's FULL name
- Date of birth
- Prize amount won

Total the Prizes Awarded

Dealer or Supervisor signs the form verifying the information.

FF. SUMMARY OF PARTICIPANTS, ENTRY FEES, AND BUY-INS (GC2-302)

This form is used for recording the tournament participants and their related fees/buy-ins.

To complete this form, record:

- Date
- Complete name of entrant
- Entry fee amount
- Buy-In amount(s)

For each entrant, add across the “Buy-In” and the “Additional Buy-In” amount. Record the sum in the “Total Buy-Ins” column. Do not include the entry fee in this calculation.

Total all columns

GG. PSJ PRIZE FUND ACCRUAL RECORD (GC2-317)

This form is a monthly accounting of a PSJ fund. Primary and reserve (back up) funds are all part of the same PSJ fund. The licensee must have a separate prize fund accrual record for each separate PSJ scheme.

This form is prepared by Accounting. To complete this form, record:

- Month and year
- Name of prize fund
- Seed money balance from the prior month
- Cumulative balance of PSJ fund from the prior month
- Date
- PSJ funds collected taken from **Reconciliation Drop/Deposit (GC2-269)**
- Amount of PSJ prizes paid out taken from **PSJ Winners Record (GC2-318)**
- Deposit amount (Deposit Amount (4) = PSJ Funds Collected (2) – PSJ Prize Payouts (3))
- Date of deposit
- Amount of any increases/decreases to seed money
- Cumulative Balance of PSJ Fund

Prior month seed money balance + seed money increases – seed money decreases = Seed Money Balance. This amount is carried over to the next month’s accrual record as Prior Month Seed \$ Balance.

Prior Month PSJ Balance is the Cumulative Balance of the PSJ fund carried forward from the last day of the prior month.

HH. PSJ WINNERS RECORD (GC2-318)

This form is used for recording the payment of PSJ prizes.

To complete the form, record:

- Date and time awarded
- Clearly print winner’s FULL name
- Date of birth
- Prize amount
- Check number

- Description of winning hand

Winner, Dealer, and Supervisor initial this form verifying the information.

II. PROGRESSIVE PRIZE FUND ACCRUAL RECORD (GC2-360)

This form is a monthly accounting of a progressive prize fund. Primary and reserve (back up) funds are all part of the same Progressive Prize Fund. Each separate Progressive Prize Fund game must have its own prize fund accrual record.

This form is prepared by Accounting. To complete this form, record:

- Month and Year
- Name of prize fund
- Seed money balance from the prior month
- Cumulative balance of progressive fund from the prior month
- Date
- Amount of progressive prize funds collected
- Amount of prizes paid out
- Deposit amount (Deposit Amount = Progressive Funds Collected – Prize Payouts)
- Date of deposit
- Amount of any increases/decreases to seed money
- Cumulative Balance of Progressive Fund

Prior month seed money balance + seed money increases – seed money decreases = Seed Money Balance. This amount is carried over to the next month's accrual record as the Prior Month Seed \$ Balance.

Prior Month Balance is the Cumulative Balance of the progressive fund carried forward from the last day of the prior month.

JJ. NOTIFICATION OF ERROR (NOE) LOG (GC2-361)

This form is used to record all NOE's that are issued for any discrepancy between the amount of gambling chips/coin counted and the amount of chips/coin recorded on the opener.

This form is prepared by Accounting. To complete this form, record:

- Date
- Serial number of Table Inventory Slip
- Game or table number
- Amount of error
- Date WSGC was notified*

NOTE: Licensees must notify the WSGC within 24 hours of errors of \$200 or more, or if there is a pattern of shortages (WAC 230-15-495).

KK. PLAYER SUPPORTED JACKPOT (PSJ) MONTHLY RECONCILIATION (GC2-362)

This form is used to compare the PSJ balance per bank statement to the PSJ balance per accrual record and document the difference.

This form is prepared by Accounting. To complete this form, record:

- The name of the prize fund
- Month and Year
- Cumulative balance from the end of the month from **Prize Fund Accrual Record (GC2-317)**
- Deposit Dates/Amounts that are in transit

- Total deposits that are in transit
- Check numbers and amounts for outstanding checks
- Total amount of outstanding checks
- Other miscellaneous deposits or withdrawals
- Adjusted PSJ Account Balance = Month End Cumulative Balance (1) + Total Reconciling Items (2)
- Adjusted PSJ Account Balance (3) should equal Month End Balance from Bank Statement (4)

Accounting signs and dates this form verifying the information.

LL. Imprest Bank Sign Out Log (GC2-319)

This form is used when issuing chip banks to dealers. If the chip bank(s) is assigned to a table with rotating dealers, this form is not required.

To complete the form, record:

- Date
- Dealer name
- Time the dealer checked the bank out
- Bank amount
- Table/Bank # (number)
- Supervisor signature
- Time the dealer checked the bank back in
- Bank amount
- (+/-) Over/Short is the difference between the amount of the bank that was checked out and the amount of the bank that was checked back in
- Initials of the Dealer and the Supervisor

FILL AND CREDIT REQUEST FORM

Date: _____ \$100 _____

AM
 PM

Time: _____ \$ 25 _____

Game/ \$ 5 _____

Table #: _____ \$ 1 _____

FILL Other: _____

CREDIT **Total:** _____

Supervisor

Security

Dealer (Credits Only)

Original – **Cage**
GC2-257 (Rev. 7/14)

Duplicate – **Drop Box**

TABLE INVENTORY SLIP (SERIAL #)

Date: _____ Time: _____ AM PM

Game/Table #: _____

Denomination	Quantity *	Amount
\$100		
\$25		
\$5		
\$1		
Other		
Other		
Other		
Halves		
Coin		
Total		

Closing Dealer	
Closing Supervisor	
Opening Dealer	
Opening Supervisor	

Original – **Closer** Duplicate – **Opener** Triplicate – **Accounting**

GC2-259 (Rev. 7/14)

* **Quantity column is optional**

Licensee Name _____

SOFT COUNT DROP

Date: _____

HUNDREDS	
	Amount
Straps	
Clips	
Loose	
Total	

FIVES	
	Amount
Straps	
Clips	
Loose	
Total	

FIFTIES	
	Amount
Straps	
Clips	
Loose	
Total	

ONES	
	Amount
Straps	
Clips	
Loose	
Total	

TWENTIES	
	Amount
Straps	
Clips	
Loose	
Total	

TOTALS	
	Amount
Total Cash	
Two (\$2.00)	
Mutilated	
Counterfeit	
Grand Total	

TENS	
	Amount
Straps	
Clips	
Loose	
Total	

Total Drop \$ _____ (From GC2-263)

Accounting/Cashier: _____

Recorder: _____

Licensee Name _____

MASTER GAMES REPORT

Gaming Date: _____

Game	A Opener	Fill Series Numbers	B Fills	Credit Series Numbers	C Credits	D Closer	E Total	F Drop	G Win / Loss	H W / L %
	----- Minus		----- Minus		----- Plus	----- Plus	----- -A-B+C+D		----- E+F	----- G / F
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										
11.										
12.										
13.										
14.										
15.										
LESS ADJUSTMENT FOR PROGRESSIVE JACKPOTS:										
TOTALS										

Recorder: _____

Counter 2 : _____

Accounting : _____

Counter 1: _____

Verifier: _____

Licensee Name

MASTER GAMES REPORT

Gaming Date: _____

Game	A	Fill	B	Credit	C	D	E	F	G	H
	Opener	Series	Fills	Series	Credits	Closer	Total	Drop	Win / Loss	W / L %
	Minus	Numbers	Minus	Numbers	Plus	Plus	-A- B+C+D		E+F	G / F
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
LESS ADJUSTMENT FOR PROGRESSIVE JACKPOTS:										
TOTALS										

	1	2	3	4	5	Total
Poker Rake						

PSJ Drop						
-----------------	--	--	--	--	--	--

Recorder: _____

Counter 2 : _____

Accounting: _____

Counter 1: _____

Verifier: _____

CAGE PAID IN / PAID OUT

(Serial #)

Paid In Paid Out Date: _____ Time: _____ AM PM

Amount: _____

Reason: _____

Authorized By: _____

Paid By: _____

Received By: _____

Licensee Name _____

SAFE/VAULT INVENTORY

Date: _____ Time: _____ AM PM

Currency		
	Strapped	Loose & Clipped
Hundreds		
Fifties		
Twenties		
Tens		
Fives		
Ones		
Total		

Chips		
	Racked	Loose
\$100		
\$25		
\$5		
\$1		
Other		
Other		
Other		
Mutilated		
Total		

Coin		
	Rolled	Loose
Dollars		
Halves		
Quarters		
Dimes		
Nickels		
Pennies		
Change Tray		
Total		

Miscellaneous		

Actual Count	+	
Previous Count	-	
Increases	+	
Decreases	-	
Over/Short*		

* Explanation:

Cashier/Accounting: _____

Witness: _____

Licensee Name
RECONCILIATION DROP/DEPOSIT

Date: _____

CHIP Count Inventory***

Total PSJ Drop	+	
Total Poker Rake	+	
Total CHIP Drop	=	
CHIPS to Cage	-	
CHIPS to Vault	-	

Due Back to Cage **

Due Back to Cage	+	
CHIPS to Cage	-	
CASH Due Back to Cage	=	

CASH Soft Count Inventory

CASH Drop	+	
CASH Due Back to Cage, OR CASH to Cage (Float)	-	
CASH PSJ deposit	-	
CASH Progressive deposit	-	
CASH Other	+/-	
CASH Other	+/-	
CASH DEPOSIT Subtotal *	=	
Checks	+	
DEPOSIT TOTAL	=	

PSJ

Total PSJ Drop	+	
PSJ Admin. Fee (10%)	-	
CASH PSJ deposit	=	

*NOTE: * If "CASH DEPOSIT Subtotal" is **positive**, add to Checks for the **DEPOSIT TOTAL**.*

*If "CASH DEPOSIT Subtotal" is **negative**, no cash will be deposited, only checks.*

Cash will be needed from the Vault/Safe for the cage.

*NOTE: ** Due Back to Cage section is not needed if cage is operated on a float*

*NOTE: *** CHIP Count Inventory section is only completed if operating poker*

Cashier/Accounting: _____

Licensee Name

CAGE INVENTORY COUNT

Currency:	Bundled	Loose	Total
\$ 100.00	\$ _____	\$ _____	\$ _____
\$ 50.00	\$ _____	\$ _____	\$ _____
\$ 20.00	\$ _____	\$ _____	\$ _____
\$ 10.00	\$ _____	\$ _____	\$ _____
\$ 5.00	\$ _____	\$ _____	\$ _____
\$ 2.00	\$ _____	\$ _____	\$ _____
\$ 1.00	\$ _____	\$ _____	\$ _____
Subtotal			\$ _____

Coins:	Rolled	Loose	Total
\$ 1.00	\$ _____	\$ _____	\$ _____
\$ 0.50	\$ _____	\$ _____	\$ _____
\$ 0.25	\$ _____	\$ _____	\$ _____
\$ 0.10	\$ _____	\$ _____	\$ _____
\$ 0.05	\$ _____	\$ _____	\$ _____
\$ 0.01	\$ _____	\$ _____	\$ _____
Subtotal			\$ _____

TOTAL CASH (1) \$ _____

Chips:	Racked	Loose	Total
\$ 100.00	\$ _____	\$ _____	\$ _____
\$ 25.00	\$ _____	\$ _____	\$ _____
\$ 5.00	\$ _____	\$ _____	\$ _____
\$ 1.00	\$ _____	\$ _____	\$ _____
Other	\$ _____	\$ _____	\$ _____
Other	\$ _____	\$ _____	\$ _____
TOTAL CHIPS			(2) \$ _____

MISCELLANEOUS	
Safe	\$ _____
Fill Bank	\$ _____
Other	\$ _____
Other	\$ _____
TOTAL MISCELLANEOUS	(3) \$ _____

CHECKS:	
Personal	\$ _____
Payroll	\$ _____
Cash Advance	\$ _____
Other	\$ _____
TOTAL CHECKS	(4) \$ _____

TOTAL CAGE BANK (1+2+3+4) \$ _____

Decreases to the Cage	
Fills	\$ _____
Paid Outs	\$ _____
Other _____	\$ _____
Other _____	\$ _____
Other _____	\$ _____
Total Decreases (5)	\$ _____

Increases to the Cage	
Credits	\$ _____
Paid Ins	\$ _____
Transfer from _____	\$ _____
NSF Check Repayment	\$ _____
Other _____	\$ _____
Total Increases (6)	\$ _____

Due Back Calculation: *	
Imprest Amount	\$ _____
(minus)	
Ending Bank (1+2+3)	\$ _____
(equals)	
Due Back to Cage	<u>\$ _____</u>

Reconciliation of Bank	
Total Cage Bank (1+2+3+4)	\$ _____
Plus Decreases (5)	+ \$ _____
Minus Increases (6)	- \$ _____
Equals Cage Inventory	= <u>\$ _____</u>
Minus Bank at Opening	- \$ _____
Over/Short	= \$ _____

Date: _____ Shift: _____

Out Cashier: _____

In Cashier: _____

Verifier: _____

* To be completed at closing. Licensee's operating the cage on a float do not complete this section.

Licensee Name

HOUSE BANKED CARD ROOM MONTHLY INCOME SUMMARY

Month/Year: _____

Cumulative Card Playing Fees				House Bank Net Win/Loss (4)	Cash Over / Short (5)
Date	Rake or Hand (1)	PSJ Admin. Fees (2)	Tournament Entry Fees (3)		
1	\$	\$	\$	\$	\$
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
Total	\$	\$	\$	\$	\$

NOTE: Each line should agree with that day's Master Games Report (GC2-263).

Licensee Name

DEALER EVALUATION FORM

Name: _____

Date / Time: _____ Floor Supervisor: _____

Shift: _____ Start: _____ Stop: _____

Game/Table #: _____ # of Decks: _____ Table Limit: _____

DEALING PROCEDURES

		<u>Yes</u>	<u>No</u>
# of Hands: _____	1 – Proper Shuffle	_____	_____
# of Players: _____	2 – Proper Cut Used	_____	_____
Bet Range: _____	3 – Proper Deck Protection	_____	_____
Ave. Shuffle Time: _____	4 – Proper Peek	_____	_____
# of Mistakes: _____	5 – Green Between Cards	_____	_____
	6 – Spread Players Card	_____	_____
	7 – Proper Take and Pay Procedures	_____	_____
	8 – Clearing Hands, Leaving Game	_____	_____

Comments: _____

Surveillance

Licensee Name

Player-Supported Jackpot Monthly Reconciliation

Prize Fund: _____

Month/Year: _____

Bank Statement Balance – End of Month

(1) \$

Reconciling Items:

Add Deposits in Transit:

<u>Date</u>	<u>Amount</u>
_____	_____
_____	_____
_____	_____
_____	_____

Total Deposits in Transit (2) \$

Less Outstanding Checks:

<u>Ck. #</u>	<u>Amount</u>
_____	_____
_____	_____
_____	_____

Total Outstanding Checks (3) \$

Other: _____ (4) \$

Total Reconciling Items (2)+(3)+(4) (5)

Adjusted Ending Bank Balance (1) – (5) (6) \$ **

Ending Balance from Prize Fund Accrual Record (GC2-317) (7) \$ **

** Lines (6) and (7) must equal.

Accounting: _____

Date: _____

WASHINGTON STATE GAMBLING COMMISSION CARD TOURNAMENT SUMMARY

NOTE: This tournament summary must be attached to Daily Card Room Record (GC2-313).

Licensee: _____ Date: _____

I. Gross Gambling Receipts Computation:

A. Entry Fees Collected	-	B. Food & Drink Offerings	=	C. Total Tournament Entry Fees (1)
\$ _____	-	\$ _____	=	\$ _____

II. Total Prizes Awarded:

A. Buy-Ins (2)	\$	_____
B. (plus) Total Prizes Paid by House	\$	_____
C. (equals) Total Prizes Awarded.....	\$	_____

III. Winners List: (Include Winner's Complete Name, Address, and Zip Code.)

	<u>Name</u>	<u>Date of Birth</u>	<u>Prize</u>
1.	_____	_____	\$ _____
2.	_____	_____	\$ _____
3.	_____	_____	\$ _____
4.	_____	_____	\$ _____
5.	_____	_____	\$ _____
6.	_____	_____	\$ _____
7.	_____	_____	\$ _____
8.	_____	_____	\$ _____
9.	_____	_____	\$ _____
10.	_____	_____	\$ _____
Total Prizes Awarded (3)			\$ _____

Signature of Preparer: _____ Date: _____

Footnotes:

- (1) Poker Tournament Entry Fees are to be recorded on *Daily Card Room Summary (GC2-313)*.
- (2) This amount must agree with the total buy-ins recorded on form GC2-302.
- (3) NOTE: Total prizes awarded must equal or exceed the total buy-ins.

Licensee Name
SUMMARY OF PARTICIPANTS, ENTRY FEES, AND BUY-INS

Date: _____

Name of Entrant	Entry Fee (3)	Initial Buy-In	Additional Buy-Ins					Total Buy-Ins (1)
			1	2	3	4	5	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
TOTALS	\$	\$	\$	\$	\$	\$	\$	\$

(2)

- (1) Total Buy-ins shall not exceed \$400 per entrant.
- (2) **IMPORTANT:** All buy-ins received must be awarded as prizes to entrants. Total prizes awarded on *Card Tournament Summary* (Form GC2-301) must be equal to or greater than the total buy-ins received from entrants. See instructions or WAC 230-15-210.
- (3) Entry Fees shall not exceed \$100 per entrant.
- (4) Record Total Tournament Entry Fees on Card Tournament Summary (GC2-301)

