



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:

- Everett ..... (425) 304-6300
- Tacoma..... (253) 671-6280
- 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**

I am writing to remind you of your responsibility as a licensee to immediately 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 immediately and we will investigate the matter.

**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 card rooms and other premises to monitor compliance with our rules and regulations.

Our mission is to keep gambling legal and honest. Thank you for your past 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.

Sincerely,

A handwritten signature in black ink that reads "Rick Day".

Rick Day  
Director

# HOUSE BANKED CARD ROOM RECORDS

## \*\* INSTRUCTIONS \*\*

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

This form is required to be prepared by the gaming operation supervisor to authorize either the preparation of a fill or credit slip for the distribution of gaming chips and coins to or from gaming tables. The request shall be prepared in duplicate form and restricted to gaming operation supervisors.

### B. FILL / CREDIT SLIP (GC2-258)

This sequentially pre-numbered form shall be prepared in triplicate by the cashier whenever gaming chips or coins are distributed to the gaming tables from the cashier's cage or removed from the gaming tables to the cashier's cage. Either the fill or the credit box is marked to indicate what the form is being used for.

### C. TABLE INVENTORY SLIP (GC2-259)

This three-part form shall be serially pre-numbered. The three parts are the original of the slip (Closer), the duplicate of the slip (Opener), and the triplicate, which is maintained and controlled by the accounting department. The form shall be prepared by the floor supervisor and verified by the dealer assigned to the gaming table.

### D. SOFT COUNT DROP (GC2-260)

This form shall be used to record and reconcile the total amount from all drop boxes counted in the count room that is to be transported to the cashier's cage. The "Grand Total" of this form shall equal the "Total Drop" recorded on the *Master Games Report* (GC2-263).

For counting purposes, currency will be separated as follows:

<u>Denomination</u>	<u>Bills in a Clip</u>	<u>Clip Value</u>	<u>Clips in a Strap</u>	<u>Strap Value</u>
\$ 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

### E. KEY CONTROL LOG (GC2-261)

This form shall be used to record the issuance of and return of all keys used to control restricted access areas by card room employees. A list of employees who are authorized access to these keys shall be recorded at the bottom of this form.

### F. NOTIFICATION OF ERROR SLIP (GC2-262)

If the opening table inventory slip does not agree with the actual opening count, the Floor Supervisor will notify the Shift Manager. The Shift Manager will prepare this form explaining the error to the Soft Count Team. The original will be dropped into the appropriate drop box. The duplicate of this form will be immediately forwarded to Accounting.

## **G. MASTER GAMES REPORT (GC2-263)**

This form is used to record all activity at each gaming table. The information shall be recorded as follows:

– Opener – Fills + Credits + Closer = Total (This number could be a negative or a positive amount depending on the activity at each gaming table).

The Fill and Credit series numbers are recorded in the designated columns.

The Drop is then recorded from the amount listed on the *Verification Sheet* (GC2-283).

Win / Loss is calculated by adding the Total and the Drop.

Win / Loss Percentage is calculated by dividing the Win / Loss by the Drop.

Opener, Fills, Credits, and Closer may be completed by the cashier's cage. The Total, Drop, Win / Loss, and Win / Loss Percentage is calculated by the soft count team.

## **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 being removed from play.

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

This sequentially numbered form is used to record any additions or withdrawals of cash from the cashier's cage. A separate form will be used for each transaction that takes place.

## **J. SAFE INVENTORY (GC2-266)**

See K below.

## **K. VAULT INVENTORY (GC2-267)**

This form is used to record the inventory of currency and chips stored in either the safe or vault, whichever is used by the gaming operation.

A daily reconciliation shall be completed at the bottom of the form.

## **L. STRAP VARIANCE LOG (GC2-268)**

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

The original will go to the accounting department and the copy will stay in the cage until the daily cage records are forwarded to accounting.

## **M. RECONCILIATION DROP / DEPOSIT & DETAIL OF BANK DEPOSIT (GC2-269)**

This two-part form is used to record the reconciliation of the drop and deposit and the detail of amounts for each deposit to be made. The details will include such items as: personal checks, cash equivalent checks, foreign checks, returned checks, credit card cash advances, and currency.

## **N. EMPLOYEE SIGNATURE CARD (GC2-270)**

This form is used to record card room employee's name, department they are working in, a sample of their signature, initials, and date completed.

**O. CAGE ACCESS LOG (GC2-271)**

See U below.

**P. SAFE ACCESS LOG (GC2-272)**

See U below.

**Q. VAULT ACCESS LOG (GC2-273)**

See U below.

**R. SOFT COUNT SIGN IN (GC2-274)**

See U below.

**S. SECURITY ROOM SIGN IN LOG (GC2-275)**

See U below.

**T. SURVEILLANCE ROOM SIGN IN LOG (GC2-276)**

See U below.

**U. VISITOR LOG (GC2-277)**

These logs are used to record the date, name/title, time in, time out, and purpose of any individual entering these specific areas of the gaming operation.

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

This form is used to record specified information for all pre-numbered forms used by the gaming operation when they are received by the gaming operation from the vendor.

**W. CASHIER WINDOW COUNT SHEET (GC2-279)**

If only one cashier is used by the gaming operation and the cage bank and the cashier's bank are the same, this form will not need to be used. You will only need use form GC2-281.

If you operate more than one cashier window, you will be required to use this form along with GC2-281.

This form is used at opening, shift change, and closing. The contents of each cashier's window is counted by the outgoing cashier and recorded on this form. The incoming cashier will then verify this recorded information with the bank at the cashier window. These banks are maintained on an imprest basis. All increases, decreases, overages, or shortages are reconciled at the bottom of this form.

**X. DAILY RETURNED CHECK REPORT (GC2-280)**

This form is used to record the collection of funds from players with any outstanding NSF checks.

The licensee fills in the date, check number, account number, check amount, date returned, signed name of drawer, date collected, amount collected, and date deposited on this form.

## **Y. CAGE INVENTORY COUNT (IMPREST BASIS) (GC2-281)**

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

The form may need to be modified to fit your card room's individual needs. The following things will effect the information that may need to be included in the cage inventory:

- ◆ The types of transactions conducted in the card room.
- ◆ If the vault or safe is included as part of the cage.
- ◆ If multiple window banks are being used.
- ◆ If multiple shifts are being used.

The modifications needed, will most likely be in the areas of:

- ◆ Types of checks accepted.
- ◆ Miscellaneous items.
- ◆ Reductions to the cage section.
- ◆ Increases to the cage section.

The first four sections of the inventory count make up the cage Total Bank. They include the following:

- ◆ Currency
- ◆ Coin
- ◆ Chips
- ◆ Checks
- ◆ Miscellaneous Items

The fifth section includes reductions to the cage.

The sixth section includes increases to the cage.

The last sections are the calculation of any due back and the reconciliation of the bank.

There is also a place to record daily information and signatures of the required employees.

## **Z. CARD ROOM MONTHLY INCOME SUMMARY (GC2-282)**

This form is used to summarize all the card room fees collected, house banking net win or loss, and any cash over or shorts for the month. The licensee records their name, the month, and the year at the top of the form. The total for each assessment method, house banking net win or loss, and any cash over or shorts are recorded from each day's daily summary and entered in the appropriate column. Each line should agree with that day's daily summary sheet. Each column is then totaled at the end of each month.

### **AA. VERIFICATION SHEET (GC2-283)**

This form is used to record the contents of each drop box counted. The count is recorded by game and table number. Each denomination of currency is recorded along with the total amount of chips counted.

This form is then signed by the following individuals: counter #1, counter #2, and recorder.

The totals, from each drop box, are then entered on the *Master Games Report* (GC2-263) in column F.

### **BB. SURVEILLANCE LOG (GC2-284 & GC2-284a)**

This is a two-part form that serves dual functions for the surveillance room personnel. This form should be confidential and should be reviewed only by surveillance personnel and their superiors.

On Part 1 of the form, personnel will record the date, if the system is functioning properly on this date, the person who is conducting the surveillance, and the reason for the surveillance. The beginning and ending times of the surveillance will be recorded, the dealer's name / license number who is being monitored, the reason, and the results of the monitoring.

Part 2 of the form will only be used if the system has any type of malfunction. If a malfunction occurs, the surveillance personnel will record the date, description of malfunction, estimated time / date of repair, dates out of and in service, and the date / time the commission was notified.

#### **CC. CARD DESTRUCTION LOG (GC2-285)**

This form shall be used to record the cancellation and destruction of decks of cards. The security officer and gaming employee verifying the destruction of the cards print their names in the space provided attesting to the accuracy of the information. The date the decks were removed from play, number of decks canceled, color of decks, date destroyed, and number of decks destroyed are recorded in the spaces provided.

#### **DD. CHIP DESTRUCTION LOG (GC2-286)**

This form shall be used to record the destruction of damaged chips. The security officer and employee verifying the destruction of the chips print their names in the space provided attesting to the accuracy of the information. The date they were removed from play, date destroyed, how destroyed, and number of chips destroyed is recorded in the space provide under the correct denominations.

#### **EE. INCIDENT REPORT (GC2-287)**

This two-part form shall be used by security / surveillance to document reportable incidents occurring on the licensed premises. All pertinent information shall be documented in the spaces provided. The original goes to the COO and the copy is retained by security.

#### **FF. DEALER EVALUATION FORM (GC2-288)**

This three-part form shall be used by surveillance to conduct evaluations of dealers. All the information shall be recorded by the person conducting the evaluation in the spaces provided. The original copy goes to the COO, the copy goes to the Shift Manager, and the second copy is retained by surveillance. ***THIS FORM IS OPTIONAL, BUT THE GAMING OPERATION SHOULD IMPLEMENT SOME TYPE OF FORM TO EVALUATE DEALERS.***

#### **GG. CUSTOMER COMP FORM (GC2-289)**

This form shall be used to record any comps provided to players by the licensee's employees. The customer's name, address, phone number, name of the employee authorizing the comp, date, item comped, and amount are recorded on the form in the spaces provided. ***THIS FORM IS OPTIONAL, BUT THE GAMING OPERATION MUST IMPLEMENT SOME TYPE OF RECORD TO TRACK COMPS TO CUSTOMERS.***

# DOCUMENT ORIGINATION & FLOW

## 1. FILL & CREDIT REQUEST FORM

Floor supervisor ~ Original to Cage ~ Accounting  
~ Duplicate to Drop Box ~ Count room ~ Accounting

## 2. FILL / CREDIT SLIP

Cashier ~ Original to Cage ~ Accounting  
~ Duplicate to Drop Box ~ Count Room ~ Accounting  
~ Triplicate Stays in Machine ~ Accounting

## 3. TABLE INVENTORY SLIP

Floor Supervisor ~ Original (Closer) ~ Full Drop Box ~ Count Room ~ Accounting  
~ Duplicate (Opener) ~ Chip Tray ~ Empty Drop Box ~ Count Room ~  
Cage ~ Accounting  
~ Triplicate ~ Cage ~ Accounting

## 4. SOFT COUNT DROP

Count Room ~ Original to Accounting  
~ Duplicate to Cage ~ Accounting

## 5. KEY CONTROL LOG

Security Room

## 6. NOTIFICATION OF ERROR SLIP

Floor Supervisor ~ Original to Drop Box ~ Count Room ~ Accounting  
~ Duplicate ~ Accounting

## 7. MASTER GAME SUMMARY

Cashier completes sections A through D ~ Original to Count Room  
Count Room completes sections E through H ~ Accounting  
Duplicate from Cashier to Accounting

## 8. CARD INVENTORY CONTROL LOG

Security / Accounting

## 9. CAGE PAID IN / OUT

Cage ~ Accounting

## **10. SAFE INVENTORY**

Cashier ~ Original to Accounting  
~ Duplicate to Cage and kept on file

## **11. VAULT INVENTORY**

Cashier ~ Original to Accounting  
~ Duplicate to Cage and kept on file

## **12. STRAP VARIANCE LOG**

Cashier ~ Original to Accounting  
~ Duplicate to Cage ~ Accounting

## **13. DETAIL OF BANK DEPOSIT / RECONCILIATION OF DROP & DEPOSIT**

Cashier ~ Original to Accounting  
~ Duplicate to Cage ~ Accounting

## **14. EMPLOYEE SIGNATURE CARD**

Original in Accounting  
Copy to Cage

## **15. CAGE ACCESS LOG**

Cage ~ Accounting

## **16. SAFE ACCESS LOG**

Safe ~ Accounting

## **17. VAULT ACCESS LOG**

Vault ~ Accounting

## **18. SOFT COUNT SIGN-IN**

Count Room ~ Accounting

## **19. SECURITY ROOM SIGN-IN LOG**

Security Room and kept on file

## **20. SURVEILLANCE ROOM SIGN-IN LOG**

Surveillance Room and kept on file

## **21. VISITOR LOGS (All restricted access areas)**

Restricted Areas ~ Accounting

**22. SENSITIVE FORM RECEIVING CONTROL SHEET**

Accounting

**23. CASHIER WINDOW COUNT SHEET**

Cage ~ Accounting

**24. DAILY RETURNED CHECK REPORT**

Original ~ Accounting  
Photocopy ~ Cage

**25. CAGE INVENTORY COUNT – IMPREST BASIS**

Cage ~ Accounting

**26. CARD ROOM MONTHLY INCOME SUMMARY**

Accounting

**27. VERIFICATION SHEET**

Count room ~ Cage ~ Accounting

**28. SURVEILLANCE LOG (2 PARTS)**

Surveillance Room ~ Kept on file

**29. CARD DESTRUCTION LOG**

Security ~ Kept on file.

**30. CHIP DESTRUCTION LOG**

Security ~ Kept on file.

**31. INCIDENT REPORT**

Security ~ Original to COO  
~ Duplicate Security

**32. DEALER EVALUATION**

Surveillance ~ Original to COO  
~ Duplicate to Shift Manager  
~ Triplicate to Surveillance

**33. CUSTOMER COMP FORM**

Gaming Pit / Supervisor ~ Accounting

## Fill and Credit Request Form

Time: \_\_\_\_\_ \$ 500 \_\_\_\_\_

Date: \_\_\_\_\_ \$ 100 \_\_\_\_\_

Shift: \_\_\_\_\_ \$ 25 \_\_\_\_\_

Pit: \_\_\_\_\_ \$ 5 \_\_\_\_\_

Game: \_\_\_\_\_ \$ 1 \_\_\_\_\_

Table #: \_\_\_\_\_ Other: \_\_\_\_\_

**Fill** **Total:** \_\_\_\_\_

**CREDIT**

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Supervisor

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Security

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Dealer (Credits Only)

Original – **Cage**  
GC2-257 (Rev. 5/00)

Duplicate – **Drop Box**

(Serial #)

### FILL / CREDIT SLIP

**Fill**

**Credit**

Date:		Time:	
Table #:			
<b>Shift:</b>	Graveyard	Day	Swing
<b>Game</b>	<b>Quantity</b>	<b>Denomination</b>	<b>Amount</b>
			\$
<b>TOTAL</b>			<b>\$</b>

Memo:

Security:	Floorperson:
Cashier:	Dealer:

Original – **Cage**

Duplicate – **Drop Box**

Triplicate – **Accounting**

(SERIAL #)

## TABLE INVENTORY SLIP

Date: \_\_\_\_\_

Shift: Graveyard Day Swing

Time: \_\_\_\_\_

Table #: \_\_\_\_\_

Game Name: \_\_\_\_\_

Chip Values	Quantity	Totals
\$500		
\$100		
\$25		
\$20		
\$5		
\$1		
Halves		
Coin		
<b>Total</b>		

Signature: \_\_\_\_\_  
Closing Dealer

Signature: \_\_\_\_\_  
Opening Dealer

Signature: \_\_\_\_\_  
Closing Supervisor

Signature: \_\_\_\_\_  
Opening Supervisor

Original – **Closer**

Duplicate – **Opener**

Triplicate – **Accounting**

# SOFT COUNT DROP

Drop Date: \_\_\_\_\_

<b>HUNDREDS</b>		
Straps		
Clips		
Loose		
<b>Total \$100.00</b>		

<b>FIVES</b>		
Straps		
Clips		
Loose		
<b>Total \$5.00</b>		

<b>FIFTIES</b>		
Straps		
Clips		
Loose		
<b>Total \$50.00</b>		

<b>ONES</b>		
Straps		
Clips		
Loose		
<b>Total \$1.00</b>		

<b>TWENTIES</b>		
Straps		
Clips		
Loose		
<b>Total \$20.00</b>		

<b>TOTALS</b>		
Straps		
Clips		
Loose		
Two (\$2.00)		
Mutilated		
Counterfeit		
<b>Grand Total</b>		

<b>TENS</b>		
Straps		
Clips		
Loose		
<b>Total \$10.00</b>		

**TOTAL DROP \$ \_\_\_\_\_ (From GC2-263)**

Accounting / Cashier: \_\_\_\_\_  
Signature

Soft Count: \_\_\_\_\_  
Signature

Original – **Accounting**

Duplicate – **Cage**



## NOTIFICATION OF ERROR SLIP

Pit / Game / Table	Shift: Day    Swing    Graveyard	Date:	Time: am pm
Remarks / Explanation / How Resolved:			

\_\_\_\_\_

Shift / Pit Manager

\_\_\_\_\_

Floor Supervisor

\_\_\_\_\_

Dealer  
Original – **Drop Box**

\_\_\_\_\_

Security  
Duplicate – **Accounting**

# MASTER GAMES REPORT

Date: \_\_\_\_\_

Shift: \_\_\_\_\_

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

Recorder: \_\_\_\_\_

Counter 2 : \_\_\_\_\_

Accting Dept: \_\_\_\_\_

Counter 1: \_\_\_\_\_

Cage/Vault: \_\_\_\_\_

## CARD INVENTORY CONTROL LOG

Date Rec'd	# Decks Rec'd	In +	Out -	Floating Balance	Signatures	
					1.	2.
					3.	4.
					1.	2.
					3.	4.
					1.	2.
					3.	4.
					1.	2.
					3.	4.
					1.	2.
					3.	4.
					1.	2.
					3.	4.
					1.	2.
					3.	4.
					1.	2.
					3.	4.

**CAGE PAID IN / PAID OUT**

**(Serial #)**

Date: \_\_\_\_\_

Amount Paid In / Out: \_\_\_\_\_

Reason: \_\_\_\_\_

Authorized By: \_\_\_\_\_

Paid By: \_\_\_\_\_

Received By: \_\_\_\_\_

# SAFE INVENTORY

Currency		
Strapped		Loose & Clipped
Hundreds		
Fifties		
Twenties		
Tens		
Fives		
Ones		
Coin Rolled		Loose
Dollars		
Halves		
Quarters		
Dimes		
Nickels		
Pennies		
Change Tray		

Chips		
Racked		Loose
\$ 500.00		
\$ 100.00		
\$ 25.00		
\$ 5.00		
\$ 1.00		
Mutilated		
Miscellaneous		

Actual Count: \_\_\_\_\_ +

Previous Count: \_\_\_\_\_ -

Debits: \_\_\_\_\_ +

Credits: \_\_\_\_\_ -

Over / Short: \_\_\_\_\_ =

Explanation: \_\_\_\_\_

Day: \_\_\_\_\_

Date: \_\_\_\_\_

Shift: \_\_\_\_\_

Cashier: \_\_\_\_\_

Witness: \_\_\_\_\_

Witness: \_\_\_\_\_

Original – Accounting

Duplicate – Cage

# VAULT INVENTORY

Currency		
Strapped		Loose & Clipped
Hundreds		
Fifties		
Twenties		
Tens		
Fives		
Ones		
Coin Rolled		Loose
Dollars		
Halves		
Quarters		
Dimes		
Nickels		
Pennies		
Change Tray		

Chips		
Racked		Loose
\$ 500.00		
\$ 100.00		
\$ 25.00		
\$ 5.00		
\$ 1.00		
Mutilated		
Miscellaneous		

Actual Count: \_\_\_\_\_ +

Day: \_\_\_\_\_

Previous Count: \_\_\_\_\_ -

Date: \_\_\_\_\_

Debits: \_\_\_\_\_ +

Shift: \_\_\_\_\_

Credits: \_\_\_\_\_ -

Cashier: \_\_\_\_\_

Over / Short: \_\_\_\_\_ =

Witness: \_\_\_\_\_

Explanation: \_\_\_\_\_

Witness: \_\_\_\_\_

Original – Accounting

Duplicate – Cage



# RECONCILIATION DROP / DEPOSIT

Date: \_\_\_\_\_

## Card Room / Cage Revenue

## Soft Count Inventory

BJ	+ _____
Let It Ride	+ _____
Caribbean Stud	+ _____
Pai Gow	+ _____
Progressive BJ	+ _____
Win / Loss (GC2-263)Total	= _____
	+ _____
NSF Checks & Fees	+ _____
Misc.	+ _____
Misc.	- _____
Over / Short	+/- _____
<b>TOTAL</b>	<b>= _____</b>

Drop	+ _____
Due Back to Cage	- _____
Miscellaneous	+/- _____
Cash from Drop	= _____
Checks from Cage	+ _____
Coin from Cage	+ _____

**BANK DEPOSIT = \_\_\_\_\_**

## DETAIL OF BANK DEPOSIT

Date: \_\_\_\_\_

1. Personal Checks	\$ _____	
2. Cash Equivalent Checks	\$ _____	Currency Deposit:
3. Foreign Checks	\$ _____	100 _____
4. Returned Checks / Redeposits	\$ _____	50 _____
5. Credit Card Cash Advances	\$ _____	20 _____
6. _____	\$ _____	10 _____
7. _____	\$ _____	5 _____
8. _____	\$ _____	2 _____
Coin (Cage)	\$ _____	1 _____
Currency (Cage)	\$ _____	= Currency Total = _____
<b>Total Cage Deposit</b>	<b>\$ _____</b>	<b>\$ _____</b>

Prepared By:

Verified By:

\_\_\_\_\_

\_\_\_\_\_

Print Name

Print Name

\_\_\_\_\_

\_\_\_\_\_

Sign Name

Sign Name

Original – **Accounting**

Duplicate – **Cage**

















**SENSITIVE FORM  
RECEIVING CONTROL SHEET**

Date Received: \_\_\_\_\_

Vendor Name \_\_\_\_\_ Invoice # \_\_\_\_\_ Consecutive Numbers: \_\_\_\_\_

Form Type: \_\_\_\_\_ From: \_\_\_\_\_

For Department: \_\_\_\_\_ To: \_\_\_\_\_

Received By: \_\_\_\_\_

Verified By: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

## CASHIER WINDOW COUNT SHEET

	Currency Bundles	Loose
Hundreds		
Fifties		
Twenties		
Tens		
Fives		
Ones		

Checks	
Personal	
Traveler	
Payroll	
Other	

	Coin Rolled	Loose
Dollars		
Halves		
Quarters		
Dimes		
Nickels		
Pennies		

Miscellaneous	
Foreign Currency	
Foreign Coin	
Pit Fills	
Pit Credits	< >
Petty Cash (Paid In)	< >
Petty Cash (Paid Out)	
Mutilated Currency	
Mutilated Coin	
Mutilated Chips	

	Chips Racked	Loose
\$ 500.00		
\$ 100.00		
\$ 25.00		
\$ 5.00		
\$ 1.00		

Increases		
<b>Total</b>		

Decreases	
<b>Total</b>	

Opening Bankroll \_\_\_\_\_

Increases \_\_\_\_\_ +

Decreases \_\_\_\_\_ -

Ending Bankroll \_\_\_\_\_ =

  

Actual Count \_\_\_\_\_ -

Over / Short \_\_\_\_\_ =

Day \_\_\_\_\_

Date \_\_\_\_\_

Shift \_\_\_\_\_

Window \_\_\_\_\_

  

Out Cashier \_\_\_\_\_

In Cashier \_\_\_\_\_



## CAGE INVENTORY COUNT-IMPREST BASIS

**For Use by Accounting Only**

Ending Bank Previous Day \$ \_\_\_\_\_  
 Due Back Paid In \$ \_\_\_\_\_  
 Total Opening Cage Bank \$ \_\_\_\_\_

Opener: \_\_\_\_\_

Shift Change: \_\_\_\_\_

Closure: \_\_\_\_\_

Currency:	Bundled	Loose	Total
\$ 100.00	\$ _____	\$ _____	\$ _____
\$ 50.00	\$ _____	\$ _____	\$ _____
\$ 20.00	\$ _____	\$ _____	\$ _____
\$ 10.00	\$ _____	\$ _____	\$ _____
\$ 5.00	\$ _____	\$ _____	\$ _____
\$ 1.00	\$ _____	\$ _____	\$ _____
<b>Subtotal</b>			<b>\$ _____</b>

**Reductions to the Cage**

Day Fills	\$ _____
Swing Fills	\$ _____
Returned Checks	\$ _____
Misc. Paid Outs	\$ _____
Other	\$ _____
<b>Total Reductions (5)</b>	<b>\$ _____</b>

Coins:	Rolled	Loose	Total
\$ 1.00	\$ _____	\$ _____	\$ _____
\$ 0.50	\$ _____	\$ _____	\$ _____
\$ 0.25	\$ _____	\$ _____	\$ _____
\$ 0.10	\$ _____	\$ _____	\$ _____
\$ 0.05	\$ _____	\$ _____	\$ _____
\$ 0.01	\$ _____	\$ _____	\$ _____
<b>Subtotal</b>			<b>\$ _____</b>

**Increases to the Cage**

Transfer from _____	\$ _____
Day Credits	\$ _____
Swing Credits	\$ _____
Non-Card Income	\$ _____
Misc. Paid Ins	\$ _____
Other	\$ _____
<b>Total Increases (6)</b>	<b>\$ _____</b>

**TOTAL CASH (1) \$ \_\_\_\_\_**

Chips	Racked	Loose	Total
\$ 500.00	\$ _____	\$ _____	\$ _____
\$ 100.00	\$ _____	\$ _____	\$ _____
\$ 25.00	\$ _____	\$ _____	\$ _____
\$ 5.00	\$ _____	\$ _____	\$ _____
\$ 1.00	\$ _____	\$ _____	\$ _____
Mutilated		\$ _____	\$ _____

**Due Back Calculations:**

Imprest Amount	\$ _____
(minus)	
Ending Bank (1+2+3+4)	\$ _____
(equals)	
<b>Due Back to Cage</b>	<b>\$ _____</b>

**TOTAL CHIPS (2) \$ \_\_\_\_\_**

**CHECKS:** Personal Qty \_\_\_\_\_ \$ \_\_\_\_\_  
 Traveler Qty \_\_\_\_\_ \$ \_\_\_\_\_  
 COM Qty \_\_\_\_\_ \$ \_\_\_\_\_  
 Other Qty \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL CHECKS (3) \$ \_\_\_\_\_**

**MISCELLANEOUS**

Foreign Currency \$ \_\_\_\_\_  
 Window Banks \$ \_\_\_\_\_  
 Vault \$ \_\_\_\_\_  
 Safe \$ \_\_\_\_\_  
 Other \$ \_\_\_\_\_

**TOTAL MISCELLANEOUS (4) \$ \_\_\_\_\_**

**TOTAL BANK (1+2+3+4) \$ \_\_\_\_\_**

**Reconciliation of Bank**

Total Bank (1+2+3+4)	\$ _____
Plus Reductions (5)	+ \$ _____
Minus Increases (6)	- \$ _____
<b>Equals Cage Inventory =</b>	<b>\$ _____</b>
Imprest Amount	+ or - \$ _____
<b>Difference (Over/Short) =</b>	<b>\$ _____</b>

Day \_\_\_\_\_  
 Date \_\_\_\_\_  
 Shift \_\_\_\_\_  
 Out Cashier \_\_\_\_\_  
 In Cashier \_\_\_\_\_  
 Verifier \_\_\_\_\_

**WASHINGTON STATE GAMBLING COMMISSION**  
**CARD ROOM MONTHLY INCOME SUMMARY**

Name of Licensee:	Month / Year:
-------------------	---------------

Date	Cumulative Card Playing Fees Assessed					Cash Over / Short
	By Time	By Rake	By Hand	Prize Fund Admin. Fee	House Banking Net Win / (Loss)	
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						
<b>Total</b>	\$	\$	\$	\$	\$	\$

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

# VERIFICATION SHEET

Date/Shift \_\_\_\_\_

Game	100.00	50.00	20.00	10.00	5.00	1.00	Chips	Misc.	Total
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
Totals									

Counter #1 \_\_\_\_\_

Counter #2 \_\_\_\_\_

Recorder \_\_\_\_\_







**WASHINGTON STATE GAMBLING COMMISSION**  
**CHIP DESTRUCTION LOG**

Chip Denominations	Number of Chips	Date Removed	Date Destroyed	How Destroyed	Security / Verifier
\$ 0.50					
\$ 1.00					
\$ 5.00					
\$ 10.00					
\$ 25.00					
\$ 50.00					
\$ 100.00					



**WASHINGTON STATE GAMBLING COMMISSION  
DEALER EVALUATION FORM**

Name: \_\_\_\_\_

ID: \_\_\_\_\_ Date / Time: \_\_\_\_\_ / \_\_\_\_\_

Pit Supervisor: \_\_\_\_\_ Tape #: \_\_\_\_\_

Shift: \_\_\_\_\_ Start: \_\_\_\_\_ Stop: \_\_\_\_\_

Pit #: \_\_\_\_\_ 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 Officer

Distribution: Original – **COO**

Duplicate – **Shift Manager**

Triplicate – **Surveillance**



# WASHINGTON STATE GAMBLING COMMISSION CARD TOURNAMENT SUMMARY

**NOTE: This tournament summary must be attached to the Card Room Daily Control Record (GC2-128).**

Licensee: \_\_\_\_\_ Date: \_\_\_\_\_

**I. Gross Gambling Receipts Computation:**

<b>A.</b>	Number of Entrants	<b>B.</b>	Entry Fee	<b>C.</b>	Total Entry Fees Collected	<b>D.</b>	Food & Drink Offerings	<b>E.</b>	Gross Gambling Receipts (1)
		X		=		-		=	
		X \$		= \$		- \$		= \$	

**II. Total Prizes Awarded:**

A. Entry Fees Used For Prizes .....	\$	_____
B. Other Cash / Mdse. Prizes.....	\$	_____
C. Total Prizes Awarded .....	\$	_____
D. Buy-Ins Returned As Prizes .....	(2) \$	_____
E. Total Prizes and Buy-Ins Awarded .....	\$	_____

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

	<u>Name</u>	<u>Address</u>	<u>Prize</u>
1.	_____	_____	\$ _____
2.	_____	_____	\$ _____
3.	_____	_____	\$ _____
4.	_____	_____	\$ _____
5.	_____	_____	\$ _____
6.	_____	_____	\$ _____
7.	_____	_____	\$ _____
8.	_____	_____	\$ _____
9.	_____	_____	\$ _____
10.	_____	_____	\$ _____

A. Total Cash Prizes .....	\$	_____
B. Cost of Promotional Material .....	\$	_____
C. Total Cash & Mdse. Prizes .....	(3) \$	_____

Signature of Preparer: \_\_\_\_\_ Date: \_\_\_\_\_

**Footnotes:**

- (1) Gross Gambling Receipts are to be recorded on the *Card Room Daily Control Record* (GC2-128) for the time and date the card tournament begins.
- (2) This amount must agree with the total buy-ins recorded on the *Summary of Participants and Buy-Ins* (GC2-302).
- (3) NOTE: Total prizes must equal or exceed the total buy-ins.

## CARD TOURNAMENT SUMMARY INSTRUCTIONS

This summary is required by WAC 230-15-205 thru 250. Please read these instructions carefully.

### I. Gross Gambling Receipts Computation:

- A. *Number of Entrants* – Enter the number of entrants participating in the card tournament.
- B. *Entry Fee* – Enter the entry fee charged to each entrant to participate in the card tournament. Note: The maximum allowed is \$100 per entrant.
- C. *Total Entry Fees Collected* – Multiply the number of entrants by the entry fee collected.
- D. *Food and Drink Offerings* – Enter the total fair market value of food and drink items provided to all tournament entrants as part of their entry fee. The fair market value of the food and drink provided shall not exceed \$25 or 50% of the entry fee and shall be treated as sales of food and drink for commercial stimulant purposes.
- E. *Gross Gambling Receipts* – Enter the total entry fees collected less the total fair market value of food and drink items provided if any. Enter the total gross gambling receipts on the *Card Room Daily Control Record* (GC2-128) for the date the card tournament was held, and on your quarterly card room activity report. Also record the time the card tournament began and ended.

### II. Total Prizes Awarded:

- A. *Entry Fees Used for Prizes* – Include the total entry fees returned to players as prizes.
- B. *Other Cash / Merchandise Prizes* – Add total of all other cash prizes and / or the actual cost of merchandise prizes awarded. Indicate whether the prizes awarded are in cash or merchandise.
- C. *Total Prizes Awarded* – Add the amounts recorded in I.A., I. B., and I.C. above. Enter the Total Prizes Awarded amount on line 2 of your quarterly card room activity report.
- D. *Buy-Ins Returned as Prizes* – Enter the total buy-ins returned as prizes. This amount must agree with the total buy-ins on the *Summary of Participants and Buy-Ins* (GC2-302).
- E. *Total Prizes Awarded and Buy-ins Awarded* – Add the total prizes awarded and the total buy-ins returned to entrants.

### III. List of Winners:

Record each winner's complete name, address, and amount of prize won. Do not include the cost of promotional items.

- A. *Total Cash Prizes* – Total the amount of prizes awarded to all winners listed.
- B. *Cost of Promotional Material* – Add the actual cost of items provided to promote the card tournament; such as hats, tee-shirts, coffee mugs, etc.; to participants as part of their entry fees.
- C. *Total Cash & Merchandise Prizes* – Add lines III.A. and III.B. Total prizes must be equal to or exceed the total of all buy-ins received.

### IV. Signature of Preparer:

- A. Enter the signature of the person preparing the summary and the date prepared.

# WASHINGTON STATE GAMBLING COMMISSION SUMMARY OF PARTICIPANTS AND BUY-INS

Licensee: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Entrant	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.							
<b>TOTALS</b>	\$	\$	\$	\$	\$	\$	\$

(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* (GC2-301) must be equal to or greater than the total buy-ins received from entrants. See instructions or WAC 230-15-210.