

Games of Chance (Las Vegas Nights, Casino Nights, Bazaars, Carnivals, etc.)

Total Number Of Gaming Tables/Wheels/Layouts Sold Or Leased To Organizations.....
Total Number Of Gaming Tables/Wheels/Layouts Sold Or Leased To Distributors (if a manufacturer).....
Total Sales Of Tables/Wheels/Layouts Sold Or Leased To Organizations.....\$
Total Sales Of Tables/Wheels/Layouts Sold Or Leased To Distributors (if a manufacturer).....\$

TOTAL AMOUNT OF ALL SALES & LEASES: \$

Raffle Devices (including software)

Total Number Of Devices Sold Or Leased To Organizations.....
Total Number Of Devices Sold Or Leased To Distributors (if manufacturer).....
Total Sales Of Devices Sold Or Leased To Organizations.....\$
Total Sales Of Devices Sold Or Leased To Distributors (if a manufacturer).....\$

TOTAL AMOUNT OF ALL SALES & LEASES: \$

I swear or affirm that the information and statements contained herein have been examined by me and to the best of my knowledge are true, correct and complete.

Print Name Title E-Mail

Signature / /
Date

****Note: This form must be attached to your quarterly invoices which are due within 20 days of the end of each quarter.**