



TWENTY-ONE AND PADDLEWHEEL DAILY REPORT
OFFICE OF ATTORNEY GENERAL
 SFN 53027 (4-10)

Organization	Site	Date
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CASH BANK					
Denomination	Starting Cash		Ending Cash		
Other					
\$20					
\$10					
\$5					
\$1					
Change					
Checks					
IOU					
TOTAL	(A)		(B)		
	Cashier	Verified By	Cashier	Verified By	Chips Redeemed – Cash Bank Difference (D - C)
	Count Team	Count Team	Count Team	Count Team	

CASINO CHIP BANK					
Denomination	STARTING		ENDING		Chips Redeemed
	Quantity	Value	Quantity	Value	
\$100					(D)
\$25					
\$5					
\$2					
\$1					
\$0.50					
\$1 Betting					Difference In Chip Bank (F - E)
TOTAL	(E)		TOTAL		
Cashier	Verified By	Count Team	Cashier	Verified By	Count Team

TWENTY-ONE GROSS PROCEEDS, PRIZES, & ADJUSTED GROSS PROCEEDS		PADDLEWHEEL GROSS PROCEEDS, PRIZES, & ADJUSTED GROSS PROCEEDS		COMBINED CASH PROFIT & BANK DEPOSIT		COMBINED CASH LONG (SHORT)	
1. Gross Proceeds - Drop Box Cash (Total of all P's)		6. Gross Proceeds - Drop Box Cash (Q)		9. Total Ending Cash (B)		14. Cash Profit (Loss) (Line 12)	
2. Chips Awarded (Total of all K's)		7. Prizes (N)	-	10. Total Drop Box Cash (Lines 1 + 6)	+	15. Total Adjusted Gross Proceeds (Line 5 + 8)	-
3. Chip Bank Difference (G)	+ / -	8. Adjusted Gross Proceeds		11. Total Starting Cash (A)	-	16. Cash Long (Short)	
4. Total Prizes (2 + / - 3)	-			12. Cash Profit (Loss)		Summary Completed By and Date	
5. Adjusted Gross Proceeds (1 - 4)				13. Bank Deposit		Summary Audited By and Date	

TWENTY-ONE – TABLE 1		TWENTY-ONE – TABLE 2		PADDLEWHEEL	
FILL #	FILL AMOUNT	FILL #	FILL AMOUNT	FILL #	FILL AMOUNT
TOTAL	(H)	TOTAL	(H)	TOTAL	(L)
CREDIT #	CREDIT AMOUNT	CREDIT #	CREDIT AMOUNT	CREDIT #	CREDIT AMOUNT
TOTAL	(J)	TOTAL	(J)	TOTAL	(M)
Chips Awarded (H – J)	(K)	Chips Awarded (H – J)	(K)	Chips Awarded (L – M)	(N)

TWENTY-ONE DROP BOX CASH TABLE 1		TWENTY-ONE DROP BOX CASH TABLE 2		PADDLEWHEEL DROP BOX CASH	
Other		Other		Other	
\$20		\$20		\$20	
\$10		\$10		\$10	
\$5		\$5		\$5	
\$1		\$1		\$1	
TOTAL	(P)	TOTAL	(P)	TOTAL	(Q)
Count Team	Count Team	Count Team	Count Team	Count Team	Count Team
Date	Date	Date	Date	Date	Date

SURVEILLANCE REVIEW - TABLE 1			SURVEILLANCE REVIEW - TABLE 2			SURVEILLANCE REVIEW - PADDLEWHEEL		
Recording Properly	Initials	Comments	Recording Properly	Initials	Comments	Recording Properly	Initials	Comments
<input type="checkbox"/> Yes			<input type="checkbox"/> Yes			<input type="checkbox"/> Yes		
<input type="checkbox"/> No			<input type="checkbox"/> No			<input type="checkbox"/> No		