Betting , Gaming & Lotteries Commission
Gaming Machine Schedule

DATE : _____

Owner _____ **Home Address** _____

Business Address _____ **Mailing Adress** _____

Premises Name _____ **Email Address** _____

Premises Address _____ **Telephone (1)** _____ **Telephone (2)** _____ Cellular _____

No.	Machine Manufacturer	Game Theme	Year Made (as seen on Cabinet)	New/ Refurbished	Date Refurbished	Software Version	Version Date	Serial No.	Model No.	Game E-Prom	Reel E-Prom	Flash Card
1.												
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