

**VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES
OFFICE OF CHARITABLE AND REGULATORY PROGRAMS
INSTANT BINGO/SEAL CARDS/PULL-TABS RECONCILIATION FORM (NON-BINGO)**

FORM 111

ORGANIZATION: _____ **DATE:** _____

I certify this form is complete and accurate to the best of my knowledge.

Signature of Cashier

Signature of Game Manager

Column:	A	B	C	D	E	F	G	H
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Beginning inventory of opened deals carried forward from the previous day

Line	Take In	Payout
1.	Totals from the previous bingo session's Form 111 (Line 16, Column G and H)	

Deals opened during the day

Line	Serial #	Deal Name	Form #	Ticket Price	# of Tickets	# of Free Tkts	Take In	Payout
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.	Totals from Form 111-A (Line 22, Column G and H of Page 1)							
11.	Total Lines 1 through 10							
12.	Total of the prizes added to the instant progressive pot amount from deals opened during this day							

Ending inventory of opened deals to be carried forward to the next day

Line	Serial #	Deal Name	Form #	Ticket Price	# of Tickets	# of Free Tkts	Remaining Take In	Remaining Payout
13.								
14.								
15.								
16.	Total Lines 13 through 15							
17.	Total of the instant progressive pot paid by check or cash							

Instant Progressive Pot

	Beginning Balance (previous day's carry over balance)
+	Additions (from Line 12, column H above)
-	Payouts (from Line 17 column H above)
=	Carry Over Balance

Totals For The Day
Line 11-16
(Line 18, Column G)

TOTAL TAKE IN (TOTAL GROSS RECEIPTS)	TOTAL PAYOUT
18.	

Cash Reconciled	
Beginning Change Fund	19.
Prizes Paid By Check	20.
Total Take In <small>(from Line 18, Column G)</small>	21.
Total Pay Out <small>(from Line 18, Column H)</small>	22.
Total Cash To Account For <small>(Lines 19 + 20 + 21 - 22)</small>	23.
Cash on Hand	24.
Overage/(Shortage) <small>Overage, if Line 24 is greater than Line 23. Shortage, if Line 23 is greater than Line 24. <small>(Attach a brief explanation for variances equal or greater than \$50 to this form)</small></small>	25.
Amount Withheld For Change Fund	26.
Deposit To Bank <small>(Line 24 - 26)</small>	27.
Attach bank validated deposit slip to this form	

**Line 11 - 12 - 16 + 17
(Line 18, Column H)**

The use of handwritten documentation during the day that would assist in the completion of this form will need to be kept as part of the organization's gaming records.