

# Application to Transport Gaming Media

Inter State Shipment

Intra State Shipment

New Mexico Gaming Control Board  
4900 Alameda Blvd. NE  
Albuquerque, New Mexico 87113  
Phone: (505) 841-9700 Fax: (505) 841-9773

Board Assigned Control Number:

--

**SHIPPER INFORMATION**

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

Address: \_\_\_\_\_

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

Contact Number: \_\_\_\_\_

License Number: \_\_\_\_\_

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

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

Carrier: \_\_\_\_\_

Carrier Phone #: \_\_\_\_\_

Mode of Transportation: \_\_\_\_\_

**ATTACH A COPY OF BILL OF LADING: IF ONE IS NOT AVAILABLE, ATTACH BILL OF SALE**

**FINAL DESTINATION**

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

Address: \_\_\_\_\_

Licensee Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

For Board Use Only:

Date Sent: _____	Time: _____
Estimated Arrival Date: _____	Time: _____
Carrier: _____	Tracking Number: _____
Mode of Transportation: _____	

**PURPOSE FOR SHIPMENT:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**QUANTITY SHIPPED:** \_\_\_\_\_

Subscribed and sworn by me this _____ Day of _____ 20 _____	
In _____ County, _____	
Signed: _____ Notary Public	
My Commission Expires: _____	

**STATEMENT BY APPLICANT:** *A person who, in an application, book or record, required to be maintained by the Gaming Control Act (60-2E-1 to 60-2E-61 NMSA 1978) or by a regulation adopted under that act or in a report required to be submitted by that act or a regulation adopted under that act, knowingly makes a statement or entry that is false or misleading or fails to maintain or make an entry the person knows is required to be maintained or made is guilty of a fourth degree felony and shall be sentenced pursuant to the provisions of section 31-18-15 NMSA 1978. (60-2E-54 NMSA 1978)*

Applicant Signature: \_\_\_\_\_

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

Subscribed and sworn by me this _____ Day of _____ 20 _____	
In _____ County, _____	
Signed: _____ Notary Public	
My Commission Expires: _____	

**For Information Systems Division Use Only:**

**Ver. 3-2004**

**Date Approved :** \_\_\_\_\_ **Division Signature:** \_\_\_\_\_

Board Assigned Control Number:

--

	Manufacturer	Eprom Model Number	Model Number/Denomination	Type of Program	New Qty.
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					
32					
33					
34					
35					

**Applicants Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_