Racetrack
Variance Report Form

Email this form to: GCB-RacetrackAudit@state.nm.us &
GCB-Enforcement@state.nm.us

Variance Report (Over/Short of $500 or more PER SHIFT)

DATE: _____ **TIME:** _____

_____ _____
GAMING DATE AND SHIFT OF VARIANCE SUPERVISOR/MANAGER NAME

_____ _____
NMGCB AGENT NOTIFIED DATE AND TIME NOTIFIED

EXPECTED $ AMOUNT: $_____
ACTUAL $ AMOUNT: $_____
OVER/<SHORT> $_____

_____
SUPERVISOR/MANAGER SIGNATURE and
LICENSE NUMBER

When a VARIANCE of $500 or more PER SHIFT occurs, the licensee must immediately notify, via telephone, their assigned NMGCB Enforcement Agent. The licensee must prepare and submit NMGCB form GC-05 (Variance Report Form) to the NMGCB Audit & Compliance Division within 48 hours of discovery of the variance. Form GC-05 shall describe the discovery, investigation, and resolution in detail below:

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Licensee shall maintain a copy of all gaming documentation associated with this variance with this GC-05 form.