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.

NEW MEXICO GAMING CONTROL BOARD
GC-05 [VARIANCE REPORT FORM]
Effective 02/28/05
Rev. 6/10