FORM 114

VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES OFFICE OF CHARITABLE AND REGULATORY PROGRAMS TEXAS HOLD'EM TOURNAMENT RECONCILIATION SUMMARY

TOURNAMENT D	ATE:				_		
ORGANIZATION:					-		
OPERATOR:					•		
TOURNAMENT S	TART	TIME:			•		
TOURNAMENT E	ND T	IME:			•		
					•		
The To	ourname		oplicable) must complete and sign complete and accurate to the bea		go session		
				Date Signed:			
Printed Name:		Signature:					
		Game Manager		Game M	anager		
				Date Signed:			
				· ·			
Printed Name:			Signature:				
Tournament Manage					anager		
1. TOTAL PLAY	ERS E	NTERED					
2. BEGINNING (CASH	ON HAND (change fu	and)				
RECEIPTS:							
3. Initial Entry Re	eceipts	:					
a. Number of Tournament Entries:							
b. Cost of Entrance:							
d. Total Entr	y Sale	s:	(Multiply line 3a x 3b)				
Additional (Chip	_					
4. Sales		Time	# Players Remaining	#Players Purchasing	Receipts		
a.	#1						
b.	#2						
C.	#3						
d	#4						
e	#5						
f.			Additional	Chip Sales	\$0.00		
5. Total Receipt	s for T	ournament	(Add lines 3d+ 4f)				
6. Add Prizes Pa	id By 0	Check:					
7. Total Funds To Account For			(Add lines 2 + 5 + 6)				

Form 114	Form 114 - Page 2 Tournament Date:								
DISBUR	SEMENTS: (D	o not include any merchan	ndise awarded as prize	es)					
8. Tournament Prizes: (include only cash and checks disbursements)									
a.	Winners of To								
b.	Highest ranke								
C.	Player sitting i of time								
d.		very player sitting at a randomly determined table at a pecific period of time.							
e.	Highest rankir	sking losing hand within a specific period of time.							
f.	Last player remaining who participated in the last man standing bet								
g.	Players purchasing additional chips based on how long such player remains in the game								
h.	Other, provide	Other, provide explanation:							
i.	Total Tourna	ment Prizes:	(Add lines 8a th	rouah 8i)					
			() laa miss sa ah	.cug.: c/					
CASH R	ECONCILED:								
9. Tot	al Cash To Acc	ninus Line 8i)							
10. End	ding Cash On H	land (include change fund)							
11. Am	ount Withheld I	For Change Fund							
12. Deposit To Bank			(Line 22 minus Line 23)						
-	(Attach bank v	validated deposit slip to this	form)						
OVERAC	GE/SHORTAGE	<u>:</u>							
13. Ove	erage/Shortage	(<u>Sh</u>							
Overage if Line 22 is greater than Line 21. (Attach a brief explanation for variances equal or greater than \$50 to this form)									
	(7							
INFORMATIONAL ENTRIES:									
Non- (Cash Prizes : Time	List each prize award of c	hips or merchandize Description		Volum				
	Value								
-									