

## STATE OF MAINE DEPARTMENT OF PUBLIC SAFETY GAMBLING CONTROL UNIT

## CHARITABLE DISTRIBUTOR SHIPPING APPLICATION MGCU-6400

Games for a "Game Night" must be approved for shipping into, out of or within of the State of Maine. Email forms to <a href="mailto:gambling.control@maine.gov">gambling.control@maine.gov</a>

## Please attach a list of serial numbers and device description.

Distributor Information	Game Night Registrant
Distributor Name:	Registrant Organization:
Contact Person:	Contact Person:
Address:	Address:
City:	City:
State/Zip:	State/Zip:
Email Address:	Email Address:
Phone Number:	Phone Number:
License Number:	Ship from if different from above:
Registration attached: Yes No	Address:
	City:
	State/Zip:
Shipper Informa	ation – If different than the distributor
Requested Shipment Date:	Receiving Date:
Carrier Name:	Phone:
Carrier Contact/Dispatch Name:	Phone:
Driver Contact Name:	Phone:
Trailer Shipping Seal Number:	Return Seal Number:
<b>Total Number of Games:</b> Table Games:	Roulette: Craps: Big 6 Wheel:
Other:	
Note: If additional carrier(s) is/are used, provide above	e information on a continuation sheet and attach to this application.
SCHEDULED SHIPMEN	NT PLANNING & APPROVAL (GCU USE ONLY)
Date Application Received:	Reference Number:
GCU Inspector Assigned:	Phone:
Received by (Print Name):	Phone:
GCU Inspector Signature:	Date:
Request Approved: Request Rejected	d: Reason, if applicable:
Deputy Director:	
Notes/Comments:	

**Table Games** = Blackjack, Poker, Caribbean stud, Texas Hold'em, Five-card stud, Three card poker, Casino War, Let It Ride, Go Fish, Baccarat, Mini Baccarat....

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