



Month: \_\_\_\_\_ Year: \_\_\_\_\_

[illegible]

Monthly Average Win per Machine                      Payback % (Month) / (Qtr) \_\_\_\_\_

Signature and Date \_\_\_\_\_ Name and Title (Please Print) \_\_\_\_\_

**Notes:** By signing/typing your name you represent the licensee for which the attached reports are being made, being duly sworn and deposited, say that this report, including any enclosed pages, have been examined by you and are to the best of your knowledge and belief a complete report made in good faith for the payments due to the State of Maine, pursuant to Maine Statutes and MGCB Rules Chapter 4 and 7. Revised 5/13/22