



STATE OF MAINE  
Department of Public Safety Gambling Control Board  
**MGCB-2500 Slot Machine Activity**  
**PROJECT WORK ORDER**

**Please submit completed form to all Inspectors**

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Date \_\_\_\_\_

Tracking Number \_\_\_\_\_ Shipment Number \_\_\_\_\_  
(if applicable)

Proposed Project \_\_\_\_\_ Facility **Oxford Casino, Oxford**

Reason for event \_\_\_\_\_

Proposed by \_\_\_\_\_

Project Start date and Time \_\_\_\_\_ Project End date and Time \_\_\_\_\_

Tech Name, Employee # and Signature \_\_\_\_\_  
(Signature)

### Machine information

Manufacturer \_\_\_\_\_ Model Number \_\_\_\_\_

Location \_\_\_\_\_ Asset Number \_\_\_\_\_

**Attach FBMS printout showing the time and date of each RAM clear (if applicable)**

### Proposed Information

### Attach MGCB 2600 Slot Change Log (if applicable)

Game Name	Serial #	Payback %	Max Bet
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Current \_\_\_\_\_

Proposed \_\_\_\_\_

Proposed Machine Location \_\_\_\_\_

PC Chip Number \_\_\_\_\_

Soft Meter Reading (if applicable) \_\_\_\_\_

### Gambling Control Use Only

(Person(s) Completing Project)

State Inspector Name and Signature \_\_\_\_\_  
(Signature)

Software Verification / Tested **YES** **NO** Kobetron GAT \_\_\_\_\_  
(State Inspector Name)

**Progressive Jackpot Amounts (See page 2)**

# Progressive Jackpot Work Sheet

Levels	Base Amount (Starting)	Increment Rate (%)	Type (stand-alone, linked)	Asset of Old Progressive	Amount Being Transferred	New Progressive Value
Level 1						
Level 2						
Level 3						
Level 4						
Level 5						
Level 6						
Level 7						
Level 8						
Level 9						
Level 10						
Level 11						
Level 12						
Level 13						
Level 14						
Level 15						

## Notes