FILL / CREDIT SLIP

DATE:_____  TIME:_____  TABLE/GAME:_____

| DENOM | QUANTITY | VALUE |
|---|---|---|
| $          0.25 | | |
| $          1 | | |
| $          5 | | |
| $          10 | | |
| $          25 | | |
| $          100 | | |
| Total | | |

CAGE

FLOOR SUPERVISOR

DEALER

*slips should be pre-numbered and consecutive

**one copy in drop box and another to cage for reconciliation purposes