

**SYSTEM AND/OR TITLE TESTING ACKNOWLEDGMENT
FORM LETTER**

(Date)

Colorado Division of Gaming
Technical Systems Group Lead
Local Office

Sent via email to either: dor_ccbhcasinos@state.co.us or dor_cripplecreekcasinos@state.co.us

RE: Results of system testing

The (*casino name*) has completed the system testing of (*system name, system version number and modules of system tested*). As a result of our testing process, we have determined the required system testing criteria have been successfully attained. Incorporated in this letter and the enclosed electronic attachments is the information to support the successful completion of our testing.

- The testing of the system/module was completed (*date*). The test period encompassed (*list the time frame of the test period*).

- For initial testing of Slot Monitoring Systems: 95% of machines tested met the 99% accuracy rate.
 - ____ Total number of machines on floor
 - ____ Total number of machines tested
 - ____ % overall passing rate
 - Number of machines passing per each meter
 - ____ Number of machines passing for coin-in meter
 - Passing rate ____ %
 - ____ Number of machines passing for coin-out meter
 - Passing rate ____ %
 - ____ Number of machines passing for drop meter
 - Passing rate ____ %
 - ____ Number of machines passing for total handpay meter, including jackpots and accumulated credits
 - Passing rate ____ %
 - ____ Number of machines passing for bill validator meter
 - Passing rate ____ %

- For testing of the Ticketing module: 100% of machines on the floor and tested met the 100% accuracy rate.
 - ____ Total number of machines on floor
 - ____ Total number of machines tested
 - ____ % overall passing rate
 - Number of machines passing per each meter
 - ____ Number of machines passing for ticket-in meter
 - Passing rate ____ %

_____ Number of machines passing for ticket-out meter
Passing rate _____ %

- The Meter Comparison Reports for the last four drops of the testing period for the following meters are included as Attachment (*casino name_MCR*): (*List all meters applicable to the testing performed.*)
 - Coin-in
 - Coin-out
 - Drop
 - Total Handpay, including jackpots and accumulated credits
 - Total bill validator or individual bill validator by denomination
 - Ticket-in
 - Ticket-out
- Soft meter readings for the last 4 drops (prior and current) in the test period and for month-end are included as Attachment (*casino name soft*).
- System meter readings for the last 4 drops (prior and current) in the test period and for the month-end are included as Attachment (*casino name system*).
- The following manually-prepared and system-generated statistical reports for the entire test period (*define “entire test period”*) have been completed:
 - Drop Report
 - Jackpot Report
 - Hold Report
 - Monthly Slot Revenue Summary Report
 - Ticket In Comparison Report
 - Ticket Out Comparison Report
- The following ticketing reports include all of the criteria listed in the ICMP. (*List the name of the report and indicate which pieces of the information listed below are contained on each report.*)
 - Tickets from Slot Device Counted by the Count Team
 - Tickets Issued Report
 - Tickets Redeemed Report
 - Tickets Redeemed by Issuing Machine Report
 - Tickets Redeemed by Cashier produced by Cashier
 - Tickets Redeemed by Kiosk Report
 - Tickets from Kiosk Counted by the Count Team
 - Tickets UnRedeemed Report
- *If the TITO module was tested, include this bullet point regarding the Hold Report: (The dollar amount of all tickets redeemed by TITO device is reported as drop/tickets redeemed, and all tickets issued by TITO device must be used when calculating the actual hold.)*
Indicate how your Hold Report includes tickets in the calculation of Adjusted Gross Proceeds.

- *If the TITO module was tested, include this bullet point: The Jackpot Report (**does or does not**) include tickets on the report or in the calculation of the meter or actual amount reflected on the Report. (If the jackpot report does include ticket information on the report or in the calculation of the amounts reflected on the report, provide a detailed description of how ticketing information impacts the Jackpot Report and the actions taken by the licensee to reflect only jackpots and accumulated credit events on the Report.)*
- The reconciliation documentation reflecting the comparison of **all** the statistical reports mentioned above is included as Attachment (*casino name stat rec*). The reconciliation indicates that the manually prepared reports (**do or do not**) tie 100% to the system-generated reports. (Provide a list of reports reconciled.) (If the reports do not tie 100%, state the report(s) that have variance(s), state the variance(s) and the reason for the variance(s).)
- A summary of the problems encountered, along with the resolutions, during the system/module testing is included as Attachment (*casino name problems*).
- The most recent and up-to-date system questionnaire is included as Attachment (*casino name_sysquest*).
- A flow chart depicting the flow of the information through the system, starting at the floor level (machine, cage, etc.) all the way through to the tax return, is included as Attachment (*casino name_sysflow*).
- (*Name of casino employee and job title*) is the contact person for (*casino name*) regarding the testing and results. (*Name of casino employee*) can be reached at (*phone number and email address*).

With this submittal, the (*casino name*) affirms that its system/module test has been accurately and successfully completed and that all Division of Gaming testing requirements have been fulfilled. All documentation, including the aforementioned, to support this assertion has been prepared and maintained. We respectfully request the Division of Gaming to conduct its review of our test results.

Sincerely,

Casino Chief Executive Officer or Equivalent
(Name and Title)

Signature & gaming license number

Casino Chief Financial Officer or Equivalent
(Name and Title)

Signature & gaming license number

Enclosures