



**MISSISSIPPI GAMING COMMISSION**  
**BWR COVER SHEET**  
 (CONTINUATION)



CHECK ONE:  **INITIAL MONTHLY**  **AMENDED**

|                   |                |  |
|-------------------|----------------|--|
| LOCATION NUMBER:  | LICENSEE NAME: | DATE SUBMITTED:<br><a href="#">Click here to enter a date.</a> |
| REPORTING PERIOD: |                |  |

| REF.#            | LAST NAME, FIRST NAME | TOTAL OF SPORTS WAGERS | TOTAL OF NONPARI-MUTUEL RACE WAGERS | TOTAL OF SPORTS PAYOUTS | TOTAL OF NONPARI-MUTUEL RACE PAYOUTS |
|------------------|-----------------------|------------------------|-------------------------------------|-------------------------|--------------------------------------|
| PRIOR SHEET      | TOTALS ONLY →         |                        |                                     |                         |                                      |
| 80               |                       |                        |                                     |                         |                                      |
| 81               |                       |                        |                                     |                         |                                      |
| 82               |                       |                        |                                     |                         |                                      |
| 83               |                       |                        |                                     |                         |                                      |
| 84               |                       |                        |                                     |                         |                                      |
| 85               |                       |                        |                                     |                         |                                      |
| 86               |                       |                        |                                     |                         |                                      |
| 87               |                       |                        |                                     |                         |                                      |
| 88               |                       |                        |                                     |                         |                                      |
| 89               |                       |                        |                                     |                         |                                      |
| 90               |                       |                        |                                     |                         |                                      |
| 91               |                       |                        |                                     |                         |                                      |
| 92               |                       |                        |                                     |                         |                                      |
| 93               |                       |                        |                                     |                         |                                      |
| 94               |                       |                        |                                     |                         |                                      |
| 95               |                       |                        |                                     |                         |                                      |
| 96               |                       |                        |                                     |                         |                                      |
| 97               |                       |                        |                                     |                         |                                      |
| 98               |                       |                        |                                     |                         |                                      |
| 99               |                       |                        |                                     |                         |                                      |
| 100              |                       |                        |                                     |                         |                                      |
| 101              |                       |                        |                                     |                         |                                      |
| 102              |                       |                        |                                     |                         |                                      |
| 103              |                       |                        |                                     |                         |                                      |
| 104              |                       |                        |                                     |                         |                                      |
| 105              |                       |                        |                                     |                         |                                      |
| 106              |                       |                        |                                     |                         |                                      |
| 107              |                       |                        |                                     |                         |                                      |
| 108              |                       |                        |                                     |                         |                                      |
| 109              |                       |                        |                                     |                         |                                      |
| 110              |                       |                        |                                     |                         |                                      |
| 111              |                       |                        |                                     |                         |                                      |
| 112              |                       |                        |                                     |                         |                                      |
| 113              |                       |                        |                                     |                         |                                      |
| 114              |                       |                        |                                     |                         |                                      |
| 115              |                       |                        |                                     |                         |                                      |
| 116              |                       |                        |                                     |                         |                                      |
| 117              |                       |                        |                                     |                         |                                      |
| 118              |                       |                        |                                     |                         |                                      |
| SUBMITTED TOTALS |                       |                        |                                     |                         |                                      |

|                           |                  |      |
|---------------------------|------------------|------|
| REPORT SUBMITTED BY/TITLE | TELEPHONE NUMBER | DATE |
|---------------------------|------------------|------|