

COMPLAINT/DISPUTE FILING PROCEDURE

The Enforcement Division of the Mississippi Gaming Commission is responsible for investigating and rendering the initial decision in all patron disputes and complaints. A dispute is defined as a claim for a specific amount of cash or merchandise, whereas a complaint may be seen as a difference of opinion between the casino and a patron, which does not involve money or items of value.

Whenever a patron has a complaint against a casino, or disputes a win or loss while at a Mississippi casino, they may request the Mississippi Gaming Commission to investigate their claim. Every complaint and dispute is taken very seriously by the Commission, assigned a case number and given to an Agent for investigation.

Patrons should file all complaints and disputes as soon as possible and in writing. Complaints and disputes should be filed (faxed or mailed) with the field office located near the casinos.

Southern District Office

Mississippi Gaming Commission
1141 Bayview Avenue, Suite 301
Biloxi, MS 39530
(228) 432-0181 Phone
(228) 432-7784 Fax
1-800-497-8550 Phone

**All Gulf Coast Casinos*

Central District Office

Mississippi Gaming Commission
620 North Street, Suite 200
P.O. Box 23577
Jackson, MS 39225-3577
(601) 576-3800 Phone
(601) 576-3849 Fax
1-800-504-7529 Phone

**Casinos in Natchez,
Vicksburg and Greenville*

Northern District Office

Mississippi Gaming Commission
P.O. Box 489
Tunica Resorts, MS 38664
(662) 363-3073 Phone
(662) 363-6768 Fax
1-800-269-3577 Phone

**All Casinos in Tunica and
Coahoma Counties*

Patrons will receive immediate notification of Commission receipt of their complaint or dispute, and an official resolution letter within thirty (30) days.

Patrons or licensees may appeal this decision when it involves a Dispute, by notification to the Mississippi Gaming Commission, Legal Division, 620 North Street, Suite 200, Jackson, MS 39202 within twenty (20) days of receipt of their initial resolution letter. A Hearing will be scheduled before an independent examiner provided by the Attorney General's office. Evidence and testimony may be presented at this time. The Hearing Officer then renders a decision with thirty (30) days.

Persons aggrieved by the Hearing Officer's decision may file an appeal directly to the Commission by again notifying the Mississippi Gaming Commission Legal Division.

Additional appeals and remedies may be available through the circuit court in the county where the petitioner resides.

Further information on claims, disputes and appeals may be found in Mississippi Code Ann §75-76-119, 121, 123, 125, 127, 159, 161, 163. Please refer also to the 13 Mississippi Administrative Code Part 3, Chapter 8.

Comments, suggestions, or questions may be directed to the Enforcement Division, Mississippi Gaming Commission, P.O. Box 23577, Jackson, MS 39225-3577 or 1-800-504-7529.

Knowingly making any false statement in a complaint filed with the Mississippi Gaming Commission may lead to liability under Mississippi law for the wrongful initiation of legal proceedings.

Mississippi Gaming Commission Complaint by Gaming Patron Form



Patron Information

PLEASE NOTE: The following information is necessary to properly investigate your complaint. The biographical information is necessary to identify you on video recordings as well as describe you to witnesses and casino employees.

Name (First, Middle, Last)

Residential Address (Street, City, State, Zip Code)

Home Telephone Number

Business Name and Address (Street, City, State, Zip Code)

Business Telephone Number

Date of Birth

Sex

Race

Height

Weight

Hair Color

Hair Style

Do you have a player's card? No Yes If "Yes" list the card number here →

Clothing and Accessories: Please describe what you were wearing at the time of the incident. Include the general type of clothing, colors, patterns and jewelry or accessories as well as anything unique or distinguishing.

Incident Information

Name of Casino Where Incident Occurred

Date Incident Occurred

Time Incident Occurred

Complaint Type

Slot Machine

Table Game

Promotion

Tournament

Other - Explain:

LOCATION: Please describe in detail, where you were in the casino at the time the incident causing your complaint occurred. If possible, list the exact slot machine or gaming table. If you do not know the machine or table number, provide a description of the location or directions.

Witnesses

Please list the names of the casino employees you spoke with about this incident. If other people were with you, please list their names, addresses, and telephone numbers.

I understand this report is being made to peace officers of the State of Mississippi and declare all information provided on this page and the following page(s) is true to the best of my knowledge and belief. I further understand if I have knowingly made false statements or intentional misrepresentations I may be prosecuted according to law. **When filing this complaint electronically, I understand my typed name substitutes for my signature.**

Signature _____

Date _____



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Narrative. In your own words, describe the incident in detail. Be sure to clearly state your complaint. Tell us what you reported to casino management and how they responded to your complaint. Identify by name or description all casino employees you dealt with concerning this complaint. Tell us what you want to happen as a result of your complaint. Feel free to use as many pages as necessary to state your complaint.
