MISSISSIPPI GAMING COMMISSION GAMING LABORATORY

GAMING DEVICE			REQUESI
Manufacturer's Name			State 7in
Address (Phone ()	Oity	Fax (_ State Zip)
Reference Number	Requeste	ed By	
Manufacturers Part Number	Version	Version Specifications	
Features Supported:			
Description of Device (attach additional	sheets if needed	d):	
I certify that the above information complete intended for the Mississippi Gaming Market. with all applicable Mississippi Gaming Concompliance with all applicable Mississippi Gaisciplinary action.	I also certify that t nmission Regulati	he hardware, a ons. Certifica	as represented, is in compliance ation of hardware that is not in
(Authorized Signature)	(Titl	e)	(Date)