

VIRGINIA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES  
 OFFICE OF CHARITABLE AND REGULATORY PROGRAMS  
 ADMISSION SALES RECONCILIATION FORM - PAPER

ORGANIZATION: \_\_\_\_\_

SESSION DATE: \_\_\_\_\_

| LINE | Column: A<br>TYPE OF PAPER | B<br>UNIT OF MEASURE<br>CARD/PACK/SHEET | C<br># OF UNITS<br>START | D<br># OF UNITS<br>FINISH | E<br># OF UNITS<br>SOLD<br>(Column C - D) | F<br>UNIT<br>PRICE | G<br>TOTAL SALES<br>(Column E x Column F) | LINE |
|------|----------------------------|---|--------------------------|---------------------------|---|--------------------|---|------|
| 1.   |                            |   |                          |                           |   |                    |   | 1.   |
| 2.   |                            |   |                          |                           |   |                    |   | 2.   |
| 3.   |                            |   |                          |                           |   |                    |   | 3.   |
| 4.   |                            |   |                          |                           |   |                    |   | 4.   |
| 5.   |                            |   |                          |                           |   |                    |   | 5.   |
| 6.   |                            |   |                          |                           |   |                    |   | 6.   |
| 7.   |                            |   |                          |                           |   |                    |   | 7.   |
| 8.   |                            |   |                          |                           |   |                    |   | 8.   |
| 9.   |                            |   |                          |                           |   |                    |   | 9.   |
| 10.  |                            |   |                          |                           |   |                    |   | 10.  |

| ADMISSIONS CONTROL PLAYER COUNT |                           |                                |
|---------------------------------|---------------------------|--------------------------------|
| Beginning Serial Number on Hand | Next Serial Number Issued | Total Count = Total Attendance |
|                                 |                           |                                |

I certify this form is complete and accurate to the best of my knowledge.

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Signature of Cashier

|  |       |
|--|-------|
| <b>TOTAL ADMISSION SALES</b><br>Carry this figure to Form 103, Line 3a       | 11.   |
| <b>BEGINNING CHANGE FUND</b>   | 12.   |
| Total Electronic Pull Tab Cash In  | 13. * |
| Total Electronic Pull Tab Cash Out   | 14. * |
| <b>DISCOUNTS GIVEN</b><br>Carry this total to Form 103, Line 10              | 15.   |
| <b>DOOR PRIZE COUPONS REDEEMED</b><br>Carry this total to Form 103, Line 18b | 16.   |
| <b>BINGO GAME PRIZE COUPONS REDEEMED</b>                                     | 17.   |
| <b>TOTAL CASH TO ACCOUNT FOR</b>   | 18.   |
| <b>TOTAL CASH ON HAND</b>  | 19.   |
| <b>OVERAGE/(SHORTAGE)</b>  | 20.   |

\* The totals reported on lines 13 and 14 are used for cash reconciliation purposes only. They will not be included on the Bingo Session Reconciliation Form 103.