

Colorado Limited Gaming Control Commission

Internal Control Minimum Procedures (ICMP)

TIP COUNT/SUMMARY SHEET

Licensed DBA		
Count Date	Shift/Day	Gaming Date
BOX # OR DEALER NAME		AMOUNT
TOTAL		\$
Cashier's Signature		
Count or Verifier's Signature		
Count or Dealer's Signature		
For Accounting Use Only		
Total agreed to Tip Distribution Sheet _____		
Clerically Accurate _____		

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TIP DISTRIBUTION SHEET

Licensed DBA:					
Shift:			Gaming Date:		
Date Distributed	Dealer Name	Dealer Signature	Issuer's Signature	Hours Worked*	Amount Distributed
					\$
Total Amount Distributed to Dealers (a)					\$
TIPS PAID OUT TO OTHER EMPLOYEES					
Employee Name	Signature of Employee Receiving Tip		Issuer's Signature	Amount Paid Out	
				\$	
Total Amount Paid Out (b)					\$
Total Tips Reported**		\$	Total Tip Distribution (a+b)		\$
For Accounting Use Only					
Total Tips Reported = Total Tip Distribution _____					
Total Tips Reported = Tip Count/Summary Sheet _____					

*If distribution based on hours worked.

** From Tip Count/Summary Sheet—should equal Total Tip Distribution