



ORGANIZATION: _____

DATE RECEIVED: _____

PT#: _____

SUPPLIER: _____

RECEIVED BY: _____

INVOICE #: _____

UNIT TYPE: _____

USE A SEPARATE FORM FOR EACH INVOICE AND TYPE OF UNIT.

GROSS REVENUE PER UNIT _____ PRIZE PAYOUT PER UNIT _____	NET REVENUE PER UNIT _____
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PULL TICKET INVENTORY AND SALES RECORD

UNIT SERIAL #	UNIT COLOUR	ISSUED BY: (SIGNATURE)	RECEIVED BY: (SELLER'S NAME PRINT & INITIAL)	DATE ISSUED	DATE UNIT CONSIDERED SOLD	AMOUNT RECEIVED	OVER*	SHORT*	SELLER'S SIGNATURE	PULL TICKET MGR. SIGNATURE FOR RECEIPT OF CASH	DEPOSITORS' INITIALS AND DATE DEPOSITED
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											

* Record overages or shortages at the 90 - 120 day reconciliation or when a type of unit solid is changed or when a unit is removed at the discretion of the Pull Ticket Manager.

PROTECTED WHEN COMPLETED