PRINT FORM

RESET FORM

FORM 3-425
7/99

TEXAS LOTTERY COMMISSION
INVENTORY RECAP AND VERIFICATION

DATE:_____ PAGE _____

ORGANIZATION NAME:_____

TXP#:_____ PREPARER'S NAME:_____

SERIES NUMBER	SERIAL NUMBER	# ON / # UP	BALANCE PER DISPOSABLE CARD SALES SUMMARY	ACTUAL COUNT OF CARDS ON HAND	DIFFERENCE OVER(SHORT)