

	<b>CESSATION OF PROGRESSIVE JACKPOT NOTIFICATION FORM</b>	Page No.	Page 1 of 3
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		Revision No.	3
		Effectivity	January 1, 2023

CRM FORM NO. 68

*The Licensee shall only be allowed to cease its progressive jackpot operations when there is another progressive jackpot available (preferably catering to the same market) of which the former progressive jackpot amount i.e., increment and reserve amount (if applicable) will be transferred to. Otherwise, the Licensee shall have to wait until the jackpot is hit. In this case, any reserve amount shall be added to the jackpot amount won. The Licensee shall accomplish this form to notify PAGCOR of any intended cessation of progressive jackpot and shall submit to GLDD at least **seven (7) days** prior to the intended cessation date.*

**Licensee:** \_\_\_\_\_  
**Name of Casino:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

**PART 1**

**SECTION A: DETAILS OF PROGRESSIVE JACKPOT**  
*(TO BE ACCOMPLISHED BY THE LICENSEE PRIOR TO THE INTENDED CESSATION)*

**Table Game**                       **Electronic Gaming Machine**

<b>Game Name:</b>	
<b>No. of Linked Machines / Tables:</b> <i>(whichever is applicable)</i>	
<b>Main Jackpot Amount (a) + (b):</b> <i>(as of date of this notification)</i>	
<b>a) Seed Amount:</b>	
<b>b) Increment:</b>	
<b>Reserve Jackpot Amount:</b> <i>(if applicable, as of date of this notification)</i>	
<b>Intended Date of Cessation:</b>	
<b>Reason for Cessation:</b>	
<b>Cessation Options:</b> <i>(Pls. check applicable box)</i>	
<input type="checkbox"/>	<b>Transfer to another available progressive jackpot</b>
<input type="checkbox"/>	<b>Cease only after the jackpot is hit</b>

We confirm and undertake to do the following:

1. Players shall be properly notified, at least seven (7) days in advance, of the date of cessation and where the incremental amount (reserve included) will be transferred to in case the jackpot is not won during the period leading to the cessation date.
2. Actual progressive jackpot amount transferred to the recipient progressive shall be confirmed by the PAGCOR Monitoring Team.

**By:**  
Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Position: \_\_\_\_\_ Date: \_\_\_\_\_

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**Attested by PMT Representatives:**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Position: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION B. SUBMISSION INSTRUCTIONS**

Once Section A is completed, please submit this form to GLDD. Hard copies may be submitted directly to the GLDD office or scanned copies of the documents may be emailed using the e-mail address of the concerned licensed casino indicated below:

Gaming Licensing and Development Department  
 Philippine Amusement and Gaming Corporation  
 12<sup>th</sup> Floor, iMET BPO Tower, CBP-1A Metropolitan Park, Roxas Blvd, Pasay City  
 Tel. No. (+632) 8522-0299 / 8522-1245 / 8522-1357 / 8522 - 1324

E-mail addresses: [gldd\\_bloomberryresorts@pagcor.ph](mailto:gldd_bloomberryresorts@pagcor.ph) / [gldd\\_codmanila@pagcor.ph](mailto:gldd_codmanila@pagcor.ph)  
[gldd\\_resortsworldmanil@pagcor.ph](mailto:gldd_resortsworldmanil@pagcor.ph) / [gldd\\_okadamanila@pagcor.ph](mailto:gldd_okadamanila@pagcor.ph)  
[gldd\\_fontanacasino@pagcor.ph](mailto:gldd_fontanacasino@pagcor.ph) / [gldd\\_fiestacasino@pagcor.ph](mailto:gldd_fiestacasino@pagcor.ph)  
[gldd\\_dheightscasino@pagcor.ph](mailto:gldd_dheightscasino@pagcor.ph) / [gldd\\_midoricasino@pagcor.ph](mailto:gldd_midoricasino@pagcor.ph)  
[gldd\\_roycecasino@pagcor.ph](mailto:gldd_roycecasino@pagcor.ph) / [gldd\\_fortunegatecasino@pagcor.ph](mailto:gldd_fortunegatecasino@pagcor.ph)  
[gldd\\_widuscasino@pagcor.ph](mailto:gldd_widuscasino@pagcor.ph) / [gldd\\_nustarcasino@pagcor.ph](mailto:gldd_nustarcasino@pagcor.ph)  
[gldd\\_winfordcasino@pagcor.ph](mailto:gldd_winfordcasino@pagcor.ph)

If submission of this notification form is done thru e-mail, the Licensee should ensure that it has been duly received and acknowledged by GLDD. The Licensee shall be notified by GLDD thru e-mail confirming receipt of this notification form. If no e-mail confirmation is received from GLDD, the Licensee should submit the notification form's hard copy directly to GLDD.

Note: **Please fill-up Part 2 of this form upon cessation of the progressive jackpot. Once duly accomplished, the Licensee shall submit this form to GLDD not later than two (2) days upon cessation of progressive jackpot.**

**SECTION C. ACKNOWLEDGEMENT (TO BE FILLED UP BY GLDD)**

**RECEIVED** pending accomplishment and submission of Part 2 of this form

Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Position: \_\_\_\_\_ Date: \_\_\_\_\_

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**PART 2**

**SECTION A: DETAILS OF CESSATION OF PROGRESSIVE JACKPOT**

*(TO BE ACCOMPLISHED BY THE LICENSEE UPON CESSATION OF PROGRESSIVE JACKPOT)*

Please check applicable box

- A. Transfer to another available progressive jackpot**
- Table Game**
 **Electronic Gaming Machine**

<b>Game Name:</b> <i>(where the jackpot will be transferred to)</i>	
<b>No. of Linked Machines / Tables:</b> <i>(whichever is applicable)</i>	

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<b>Current Main Jackpot Amount:</b> <i>(as of date of transfer)</i>	
<b>Current Reserve Jackpot Amount:</b> <i>(as of date of transfer)</i>	
<b>Jackpot Amount Transferred (a) + (b):</b>	
<b>a) Increment:</b>	
<b>b) Reserve Jackpot Amount:</b> <i>(if applicable)</i>	
<b>Date Transferred:</b>	
<b>Updated Jackpot Amount:</b> <i>(Current Main Jackpot Amount + Jackpot Amount Transferred)</i>	

**B. Cease once the jackpot is hit**

<b>Game Name:</b>	
<b>No. of Linked Machines/Tables</b> <i>(whichever is applicable)</i>	
<b>Main Jackpot Amount:</b>	
<b>Reserve Jackpot Amount:</b> <i>(if applicable)</i>	
<b>Date and Time of Jackpot:</b>	
<b>Amount of Jackpot Hit:</b> <i>(Main + Reserve Jackpot Amounts)</i>	

**By:**  
 Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Position: \_\_\_\_\_ Date: \_\_\_\_\_

**Attested by PMT Representatives:**  
 Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Position: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION C. ACKNOWLEDGEMENT (TO BE FILLED UP BY GLDD)**

**RECEIVED** with REFERENCE NO. \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Position: \_\_\_\_\_ Date: \_\_\_\_\_