Patron Dispute Form – Sports Wagering Division

TYPE OF REPORT - PLEASE CHECK ONE	
PATRON DISPUTE	
CRIME/OTHER VIOLATION	
CONTACT INFORMATION	
Information you provide to the Massachusetts Gaming Commissi your identification and contact information will allow us to contact	ion is confidential. Disclosure of your identity is optional, but providing it you in the future to discuss the nature of the incident.
Your Name:	
Address:	
Home Phone:	Mobile Phone:
Email Address:	
SUMMARY OF INCIDENT	
Gaming Establishment where Incident Occurred (or online provider):	
Window or Kiosk Number:	
Date of Incident:	Approximate Time of Incident:
Describe in as much detail as possible the nature of the incident, whether you reported this to the Massachusetts Gaming Commission, the gaming facility's security, or another authority, and if so, how they responded to the incident. Use additional pages if necessary.	
May we contact you? YES	NO
Signature:	Date:

Please understand that the Massachusetts Gaming Commission's primary mission is to ensure public confidence in the integrity of gaming and in the strict oversight of gaming establishments in the Commonwealth of Massachusetts. MGC will review your submission to ensure the gaming establishments are complying with the law, MGC regulations, and their internal controls. If appropriate, MGC will take regulatory enforcement action in the manner dictated by the circumstances and the governing law. MGC cannot provide you with legal advice or bring legal action on your behalf.

Please submit this completed form to a Massachusetts Gaming Commission Sports Division via email mgcsportswagering@massgaming.gov, or by mailing it to:

MASSACHUSETTS GAMING COMMISSION

101 Federal Street, 12th Floor Boston, MA 02110 ATTN: Sports Wagering