

MESCALERO APACHE TRIBAL GAMING COMMISSION

P.O. Box 329

287 Carrizo Canyon Road Mescalero, NM 88340 Ph (575) 464-7100 Fax (575) 464-7115

APPLICATION FOR GAMING VENDOR'S LICENSE

I. GENERAL INFORMATION

(A) Name of Enterprise

State the complete names of the business enterprise and list names under which this enterprise has done business within the last ten years. For the purpose of this form "enterprise" shall be defined to include any corporation, association, operation, firm, partnership, trust or other form of business as well as natural person.

trust or other form of busin				
Name of Enterprise:				
(Include Trade Names and/or I	DBA's):			
27				
Name of Enterprise (past ten ye	ears):			
Federal Tax ID Number:				
rederar rax iD Number.				
Address				
Contact Person:	Title:		Telephone Number:	
D ' M''! All (C'	1 (0) 1 (7) (0)			
Business Mailing Address: (Cit	ty/State/Zip/County)			
Premises (Street) Address: (Cit	ty/State/Zin/County)			
remises (Succe) radiess. (Cit	ty/State/21p/County)			
Telephone Number:	Fax Number:		E-Mail Address:	
			E-Mail Address:	1
List the address of eac manufactured goods a	Fax Number: ch office, warehouse, or outland/or provide services from	1.	nufacture, store, or sel	l your
List the address of eac manufactured goods a	ch office, warehouse, or outl	1.		l your
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* Releases of Information Authorization forms are required for all identified individuals in sections II and III*

II. TYPE OF ENTERPRISE & OWNERSHIP INFORMATION (Check applicable block and submit the required information):

Note: Include a copy of business license, an organization chart, which includes all parent, subsidiary, related entities, including holding companies, and their relationships. (Label as Attachment A1) Provide the following information as applicable for the enterprise and all parent companies.

[[] Individual/ Sole Proprietor(s)⇒ Include Spouse (include maiden name)						
[Partnership (Limited and General) ⇒ Attach a List of All Partners and Their Spouses (include maiden name) ⇒ Partnership Agreement (If no agreement, list terms and date formed) 						
]	 [] Limited Liability Company ⇒ Attach a list of all members and their spouses (include maiden name) ⇒ Filing with Secretary of State/Province ⇒ Organizational Documents and/or member agreements 						
1	 [] Corporation ⇒ Attach a list of Corporate Officers, Directors, and Shareholders owning 5% or more of stock, and their spouses (include maiden name) ⇒ Signed and Dated Certification of Corporation and/ or Articles of Incorporation/ Bylaws 						
NOTE: Provide	the followin	g information for the above co	orresponding	g individuals in	the format shown: (Label as Attachment A2	<u>(</u>)	
Names		Title		Street Add	lress, City, State, Zip, County		
SSN	A.	KA.	DOB		% of Ownership		

III. STATE THE NAME, DATE OF BIRTH, RESIDENCE ADDRESS, POSITION WITH OR RELATIONSHIP TO THE ENTERPRISE & ATTACH A RECENT 3"x5" COLOR PHOTO FOR THE FOLLOWING PERSON(S). (Label as Attachment B):

- (A) All persons of the enterprise who will be directly dealing with any Inn of the Mountain Gods Casino or Casino Apache licensee. To include all sales representatives, field technicians, and remote access technicians dealing with Casino Apache or the Inn of the Mountain Gods Casino.
- **(B)** All persons associated with the enterprise that will be signing agreements with any Casino Apache or Inn of the Mountain Gods Casino licensees.
- **(C)** The immediate supervisor(s) of each of the persons with whom casino licensees will be directly dealing.
- (**D**) The person(s) responsible for or in charge of the offices out of which these supervisor(s) work.

^{*} Releases of Information Authorization forms are required for all identified individuals in sections II through III*

	Yes	t the requested material for any "Yes" answe		
		1. Does any person or entity listed in Sect ownership interest in any other gambling a details (Label as Attachment C1)		
		2. Does any person or entity, other than the any financial or ownership interest in this contains and details of interest (including assinterest or share of profits has been pledge contract or sale, or whom as an obligation gambling operation. (Label as Attachment Care	enterprise? Provide a listings, landlords, etc.) or d as a security for the perfor enterprise liabilities	et, including to whom any erformance of a
		3. Does any person or entity have an optic enterprise (5% or more)? Explain, giving (Label as Attachment C3)	- ·	
		4. Was the purchase or startup of the enter from loans)? Provide narrative statement a Attachment C4)	-	· ·
		5. Does any person or entity other than the equipment, or any other assets (including particular details including owner, item and terms.	patents) used by the appl	<u> </u>
PUBL	ICLY	TRADED		
(A)	If Yes,	enterprise a publicly traded corporation? please submit the following information on all in	Yes Nonestitutional investors that I	
	If Yes, the ent			nold 5% or more intere
	If Yes, the ent	please submit the following information on all interprise:	nstitutional investors that l	nold 5% or more intere
· , ,	If Yes, the ent	please submit the following information on all interprise:	nstitutional investors that l	nold 5% or more intere
	If Yes, the ent Name and	please submit the following information on all interprise: Address of Institutional Investor	nstitutional investors that l	nold 5% or more intere
Table contin	If Yes, the ent Name and	please submit the following information on all interprise: Address of Institutional Investor Place Attachment D)	% of Ownership	Number of Shares He
Table contin	If Yes, the ent Name and	please submit the following information on all interprise: Address of Institutional Investor Place Attachment D)	nstitutional investors that l	Number of Shares He
Table contin	If Yes, the ent Name and	please submit the following information on all interprise: Address of Institutional Investor Place Attachment D)	% of Ownership	Number of Shares He
Table contin B) Ticker	If Yes, the ent Name and Used (Laborated Symbol)	please submit the following information on all interprise: Address of Institutional Investor Place Attachment D Exchange Traded OTERPRISE ENTITLED TO INDIA OTERPRISE ENTITLED TO INDIA	% of Ownership On:	Number of Shares He
Table contin B) Ticker	ued (Laborate Symbol) HIS EN	please submit the following information on all interprise: Address of Institutional Investor Place Attachment D Exchange Traded TERPRISE ENTITLED TO INDIA Owned and Controlled by Native American	% of Ownership On:	Number of Shares He

[]	Manufacturer	[]	Distributor
[]	Service Supplier	[]	Gaming Equipment/Supplies
[]	Gaming Machines	[]	Bingo Paper/ Supplies
[]	Pull ticket/Tab or Punchboard	[]	Management Co./ Financier
[]	Consultant	Ī]	Casino Junket
Ī	ī	Other (State primary nature of go	ods/se	rvic	ces to be provided.)

VIII. SUBCONTRACTORS/CONSTULTANTS/OTHERS PERFORMING SERVICES FOR ENTERPRISE:

Note: For licensing application purposes, the term "subcontractor" means any corporation, business, organization, or entity, consultant, or person(s) other than the enterprise or enterprise's employees, that the enterprise contracts or authorizes to do work for Casino Apache or the Inn of the Mountain Gods Casino. The enterprise may not anticipate the use of subcontractors at the time of the initial license application, however all subcontractors will be required to complete a separate licensing application prior to any work being authorized. If the enterprise has not yet selected a subcontractor, the enterprise must provide the requested information as soon as it becomes known. **No subcontracted work may be authorized under the enterprise's license.** Failure to identify subcontractors or provide the required information on subcontractors could adversely impact the enterprise licensing process or the Enterprise's license.

Will the Enterprise use a subcontractor to provide all or part of the described services or products listed under Section VII? YES NO
If yes, please provide the name, address, telephone number and designated agent of the subcontractor. (Label as Attachment F)

(B) Who (company or enterprise (s)?	individual) prepares th	he tax returns, government	forms, audits, and repor
(C) Where are the final	ancial books and recor	ds for the enterprise's busi	iness kept?
		nis enterprise currently ma following information. Inc	1 0
Institution Name	Account #	Contact name	Telephone #
Street Address	City	State/Province	Zip
Creditor Name Str Loan Number (F) Attach a copy of the	reet Address C Loan Amount he enterprise's financia	City State/Province Date Acquired al records. The financial re	Zip Date Due. cords must reflect the be
Creditor Name Str Loan Number (F) Attach a copy of the operation for whice information will result (Label as Attachmen 1) Certified copies 2) Certified copies	Loan Amount the enterprise's financial the application is being the second of the sec	City State/Province Date Acquired all records. The financial reing submitted. Failure to sall of the application. Include previous three (3) years. Into for previous three (3) years.	Zip Date Due. cords must reflect the besupply adequate financial de the following:
Creditor Name Str Loan Number (F) Attach a copy of the operation for which information will result (Label as Attachmen 1) Certified copies 2) Certified copies NOTE: If the enterestimated beginning	Loan Amount the enterprise's financia the application is bettered in delays or denia at G3): the sof Tax Returns from the sof financial statement reprise is a prospective or the balance sheet (proformation of the enterprise and the enterpri	City State/Province Date Acquired al records. The financial reing submitted. Failure to sall of the application. Include previous three (3) years.	Zip Date Due. cords must reflect the besupply adequate financial de the following: ears. g, submit an bunt(s)
Creditor Name Str Loan Number (F) Attach a copy of the operation for whice information will result (Label as Attachment 1) Certified copies 2) Certified copies NOTE: If the enterestimated beginning and source(s) of funsupport declaration. BT/BANKRUPTC as the enterprise ever file.	Loan Amount the enterprise's financial the application is better the application is better that G3): the sof Tax Returns from the sof financial statement of the statement of	Date Acquired Pal records. The financial reing submitted. Failure to sall of the application. Include a previous three (3) years. Into the for previous three (3) years are for previous three (3) years and a statement of the amount of the amount of the amount of the statement of the amount of the statement of the amount of the statement of the	Zip Date Due. cords must reflect the besupply adequate financial de the following: ears. g, submit an punt(s) ruptcy or ever been involved a debt?

 \square Table continued (Label as Attachment H)

X.

т	□ No	☐ Yes	If you answered Yes		
Taxing Ag	gency	Type of Tax	Date of Taxing Period (MM/YY)	Amount	Status/Disposition
☐ Table	continued (I al	bel as Attachment	T)		
	continued (Lai	dei as Attachment	1)		
LIT	IGATION	V			
(4)	Ic vour on	tarnrica aurrantly	y o norty to ony civil lov	onito?	
(A)	is your en	_	y a party to any civil law	suits?	
If wor	i anawarad V	□ No Zos submit o dos	Yes	vil litigation to	which the enterprise or a
-			ether in this state or anot	_	
	• •	oel as Attachment		ner jurisaretron.	. merade die fonowing
	·		,		
		al title or caption			
	2. Docke	t or case number	r	aa aasa is pandir	20
	 Docke Name 	et or case number and location of t	r the court before which th	ne case is pendir	ng
	 Docke Name Identit 	et or case number and location of to by of all parties to	r the court before which th	ne case is pendir	ng
	 Docke Name Identit General 	et or case number and location of to by of all parties to	r the court before which th o the litigation	ne case is pendir	ng
(B)	 Docke Name Identit Genera Status 	and location of the sy of all parties to all nature of all classification.	r the court before which th o the litigation		ng
(B)	 Docke Name Identit Genera Status Has your of 	and location of the sy of all parties to all nature of all classification.	r the court before which the the litigation laims being made a party to any other litiga	tion:	
(B)	 Docke Name Identit Genera Status Has your of in the 	et or case number and location of the ety of all parties to all nature of all clarification disposition enterprise been a	r the court before which the the litigation laims being made a party to any other litiga	tion:	ng fficers, executives, or ma
(B)	 Docke Name Identit Genera Status Has your of in the 	et or case number and location of the ety of all parties to all nature of all clarification disposition enterprise been a	r the court before which the the the litigation laims being made a party to any other litigates in which the enterpris	tion:	
(B)	 Docke Name Identit Genera Status Has your of in the were a 	et or case number and location of the sy of all parties to all nature of all clarification denterprise been a previous ten year accused of intention.	the court before which the othe litigation laims being made a party to any other litigates in which the enterpristional misconduct? Yes	tion: e or any of its o	
(B)	 Docke Name Identit Genera Status Has your e in the were a 	et or case number and location of the sy of all parties to all nature of all clarification denterprise been a sprevious ten year accused of intention of the system of the	the court before which the othe litigation laims being made a party to any other litigates in which the enterpristional misconduct? Yes	tion: e or any of its o erprise or any o	fficers, executives, or ma
(B)	 Docke Name Identit Genera Status Has your e in the were a 	et or case number and location of the sy of all parties to all nature of all clarification denterprise been a sprevious ten year accused of intention of the system of the	the court before which the othe litigation claims being made a party to any other litigaters in which the enterpristional misconduct? Yes ecision adverse to the enterprise course.	tion: e or any of its o erprise or any o	fficers, executives, or ma

XI.

TAX INFORMATION

		managers could reasonab	le be expected to reflect up	rprise or any of its officers, executives or on the current or future financial responsib n, or integrity of the enterprise or any of it	•
		officers, executives or ma	anagers?	\square No \square Y	es
		If you answered Yes to an	ny of the above, submit the	following: (Label as Attachment J2)	
		 Docket or case Name and loca Identity of all 	ation of the court before whe parties to the litigation to of all claims being made	nich the case is pending	
	(C)	alleged violation of the Fe any state, province or cou	ederal Antitrust, Trade Reg untry entered against it/ or h	ee or consent order pertaining to a violatio ulation or Securities Laws, or similar laws has the enterprise been named as an un-ind te or any other jurisdiction?	of
		If you answered Yes to Sec	etion XII C, submit the follo	owing: (Label as Attachment J3)	
		Docket or Cas	ress of Court or Agency gement		
X	Sub: (Lab	CPRESENTATIVES mit the name, business addresel as Attachment K) Legal Services	ess, and the telephone num	ber of the enterprise's representatives for:	
X	Sub: (Lab (A) L (B) R e: p	mit the name, business address as Attachment K) Legal Services Legistered or authorized agentity pursuant to applicable	nt upon whom services of prules, regulations and/or St	ber of the enterprise's representatives for: brocess in any proceeding against the filing atutes of the State of New Mexico or district Court for the District of N	
XI	Sub: (Lab (A) L (B) R e: p N	mit the name, business address as Attachment K) Legal Services Legistered or authorized agentity pursuant to applicable roceeding in any court of the Mexico may be made. GULATORY AGENC c or regulatory agency (other	nt upon whom services of prules, regulations and/or Stee State including the United State including the United State including the United State including agencies) results.	process in any proceeding against the filing atutes of the State of New Mexico or d States District Court for the District of N gulate the enterprise?	
XI	Suba (Lab (A) L (B) R ea p N IV. REA Does a publi	mit the name, business addresel as Attachment K) Legal Services Legistered or authorized agentity pursuant to applicable roceeding in any court of the Mexico may be made. GULATORY AGENC c or regulatory agency (other No Yes	nt upon whom services of prules, regulations and/or Stee State including the United State including the United State including the United State including agencies) reaches the following the If Yes, complete the following	process in any proceeding against the filing atutes of the State of New Mexico or d States District Court for the District of N gulate the enterprise?	
XI	Sub: (Lab (A) L (B) R e: p M	mit the name, business address as Attachment K) Legal Services Legistered or authorized agentity pursuant to applicable roceeding in any court of the Mexico may be made. GULATORY AGENC c or regulatory agency (other	nt upon whom services of prules, regulations and/or Stee State including the United State including the United State including the United State including agencies) results.	process in any proceeding against the filing atutes of the State of New Mexico or d States District Court for the District of N gulate the enterprise?	
XI	Sub: (Lab (A) L (B) R e: p M	mit the name, business address as Attachment K) Legal Services Legistered or authorized agentity pursuant to applicable roceeding in any court of the Mexico may be made. GULATORY AGENC c or regulatory agency (other No Yes and Location of Public	nt upon whom services of prules, regulations and/or Stee State including the United State including the United State including the United State including agencies) reaches the following the If Yes, complete the following	process in any proceeding against the filing atutes of the State of New Mexico or d States District Court for the District of N gulate the enterprise? wing chart: License No. or Other Identifying	
XI	Sub: (Lab (A) L (B) R e: p M	mit the name, business address as Attachment K) Legal Services Legistered or authorized agentity pursuant to applicable roceeding in any court of the Mexico may be made. GULATORY AGENC c or regulatory agency (other No Yes and Location of Public	nt upon whom services of prules, regulations and/or Stee State including the United State including the United State including the United State including agencies) reaches the following the If Yes, complete the following	process in any proceeding against the filing atutes of the State of New Mexico or d States District Court for the District of N gulate the enterprise? wing chart: License No. or Other Identifying	

horse raci	perations (including n	nit or other autho manufacturer or di	tes, directors and/or principal rization to participate in Ind stributor of gaming supplies & lottery, or sports betting)?	ian gaming or other lawfu
\square N	o	f Yes, submit the	e following information: (La	abel as Attachment L1)
lame & Address	of Licensing Agency	License No.	Type of Gaming Activity	Status
(C) Has the e	nterprise ever had a	complaint or othe	er notice of pending discipling	nary action from any
jurisdicti	on?	\square No	o	
(D) Has the	enterprise ever had a	ny license or cert	ificate issued by any jurisdic	ction denied, restricted,
	ed, revoked or not rer			
(E) Has the	enterprise ever withd		ion, license or certificate in	any jurisdiction?
	to any of the questic or circumstances: (La		t the following information,	include a statement
	ame of Licensing Authori		Action Taken	Date of Action
		rise's registration	n with the Department of Just	stice
(F) Provide (label as attack	· · · · · · · · · · · · · · · · · · ·			
(label as attacl	EMENTS	o any written agı	reements with the Inn of the	Mountain Gods Casino o
(label as attacl	EMENTS enterprise entered int	o any written agı	reements with the Inn of the	Mountain Gods Casino o
XV. AGRE (A) Has the	EMENTS enterprise entered int		reements with the Inn of the y of such an agreement. (La	
(label as attack XV. AGRE (A) Has the Casino A	EMENTS enterprise entered int pache? Yes If Y enterprise entered int	es, submit a cop		bel as Attachment M1)
(label as attack XV. AGRE (A) Has the control of	EMENTS enterprise entered interprise entered interp	es, submit a cop o any unwritten a	y of such an agreement. (La	bel as Attachment M1) he Mountain Gods Casino agreement, including in

- (D) For each agreement or expected agreement with the Inn of the Mountain Gods Casino or Casino Apache, explain:
 - 1. How and when the terms of compensation are to be determined. If different responses are required for different agreements, identify each response with the particular agreement to which it relates.
 - 2. How and when orders, if any, are to be placed under each agreement. (Label the above responses as Attachment M3)

(E)	Are, or were, any agreements between thi Casino Apache, in any way subject to or o Mountain Gods Casino or Casino Apache enterprise whatsoever? No Yes If Yes, submit a list of each such agreements	conditioned upon any or e, its employees or eithe	ther agreement between r this enterprise or any o	the Inn of the other
(F)	Attachment M4) Are any of the suppliers, vendors or subcombodiers of any securities or creditors as to enterprise? No Yes If yes, identify the said suppliers, vendor amount thereof. (Label as attachment M5)	any long or short term	secured or unsecured de	ebt of the
I CERTI OF MY I I further consent to the enterp	ERTIFICATION FY THAT THE FOREGOING INFORM KNOWLEDGE AND BELIEF. understand that any false statements or me to the disclosures on any part of this applications or series and the series of the series. Enterprise:	isrepresentation of any	information, as well as	a failure to
By:	(Print Name) (Signature)	<u></u>	itle)	- -
	(Signature)	(D	ate)	

My Commission Expires:

RELEASE OF ALL CLAIMS

The undersigned has filed a Vendor Gaming License Application with the Mescalero Apache Tribal Gaming Commission (MATGC). In consideration of the assurance by the MATGC that no decision on said "application" will be taken except after deliberate, intensive and thorough investigation of the undersigned, including but not limited to; background, associates, and finances, the undersigned does for myself, my heirs, executors, administrators, successors and assigns, hereby release, remise and forever discharge the MATGC, its members, agents and employees, from all manner of actions, cause of action, suits, debts, judgments, executions, claims and demands whatsoever, known or unknown, in law or equity, which the undersigned ever had, not has, may have, or claim to have against any of all said entities or individuals arising out of or by reason of the processing or investigation of or other action relating to the undersigned's "application."

I, the undersigned, have read this release and understand all terms associated. I execute it voluntarily and with full knowledge of its significance.

In witness whereof, I,		, on behalf of			
(pr	int name)		(com	pany name)	
of,			(State)	, on the	uu y
	$\overline{\mathrm{Si}}$	gnature			
Subscribed and sworn to before r	ne on the	day			
of	,	<u>.</u>			
My commission expires:					
III. Notary Public in and for	the .				
County of					
City of					
State of					

AUTHORIZATION FOR RELEASE OF INFORMATION

Presented to:		
I,		
(Name)	(Social Security #)	(DOB)
authorize any investigator, special agent, Federal Bureau of Investigations, or any Tr to determine my suitability for involvement activities, including but not limited to; empired institutions, hospitals and health collimited to; my academic, residential, per records, whether or not such information statutory or common law privilege.	ribal, State or local law enforcement in Indian Gaming, to obtain any illoyment, schools, criminal justice a are professions, and other sources. formance, disciplinary, financial,	t or investigation agencies, in order nformation requested related to my gencies, property (real or personal). The information includes, but not employment and criminal history
I authorize custodians of such records and streview and copying of any and all documents representative of The Mescalero Apache of the contrary.	nents, records or correspondence p	ertaining to me, upon request of a
I agree to accept any risk of adverse public use of information that is obtained in condocument.		•
I agree to indemnify and hold harmless any and employees from and against all claims arising out of or by reason of complying wit	, damages, losses, and expenses, in	
I understand that the information released background investigations to process my approach to the gaming operation, as required by The	oplication for a gaming license for	providing gaming goods or services
Signature	Date	
This instrument was acknowledged before n	me on the	
day of,,	<u>.</u>	
My commission expires:		
IV. Notary Public in and for the		
County of		
City of		

State of