

APPLICATION FOR GAMING RELATED 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.

Name of Enterprise:

(Include Trade Names and/or DBA's):
Name of Enterprise (past ten years):
In what State(s) is the Enterprise registered to do business?
Federal Tax ID Number:

(B) Address

Contact Person:	Title:	Telephone Number:			
Business Mailing Address: (City/State/Z	ip/County)				
Premises (Street) Address: (City/State/Zip/County)					
Telephone Number:	Fax Number:	E-Mail Address:			

* 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):

- [] Individual/ Sole Proprietor(s)
- [] Partnership (Limited and General) Attach a List of All Partners
- [] Limited Liability Company Attach a list of all members
- [] Corporation Attach a list of Corporate Officers, Directors, and Shareholders owning 5% or more of stock

NOTE: Provide the following information for the above corresponding individuals: (Label as Attachment A)

Names		Title		Street Address, City, State, Zip, County	
SSN	A.KA	۱.	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 Casino Apache or Inn of the Mountain Gods Casino Licensee, to include all sales representatives and 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*

IV. FINANCIAL INTEREST

Please submit the requested material for any "Yes" answers: No Yes

1. Does any person or entity listed in Sections II or III have any financial or ownership interest in any other gambling activity or enterprise: Provide full details. (Label as Attachment C)

V. PUBLICLY TRADED

(A) Is the enterprise a publicly traded corporation? If Yes, please submit the following information on all institutional investors that hold 5% or more interest in the enterprise:

Name and Address of Institutional Investor	% of Ownership	Number of Shares Held

□ Table continued (Label as Attachment D)

 (B) Ticker Symbol:
 Exchange Traded On:

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VI. **IS THIS ENTERPRISE ENTITLED TO INDIAN PERFERENCE?**

(At least 51% Owned and Controlled by Native Americans) _____ No

Yes

If Yes, list Name and Location of Tribal affiliate and attach Tribal Membership documentation. (Label as Attachment E)

VII. **TYPE OF PRODUCT/SERVICE:** Check all that apply:

ſ	1	Manufacturer	ſ	1	Distributor
ſ	-	Service Supplier	[ĺ	Gaming Equipment/Supplies
[]	Gaming Machines	[]	Bingo Paper/ Supplies
[]	Pull ticket/Tab or Punchboard	[]	Management Co./ Financier
[]	Consultant	[]	Casino Junket
[]] Other (State primary nature of goods/services 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)

IX. **RECORD KEEPING**

(A) Who (company or individual) maintains the enterprise's business records?

X. DEBT/BANKRUPTCY ACTIONS

Has the enterprise ever filed, or had filed against it, a proceeding for bankruptcy or ever been involved in any formal process to adjust, defer, suspend or otherwise work out payment of a debt?

	\square No \square Yes I	f you answered Yes, complete the fol	lowing:
Date of Filing	Name and Location of Court	Case Number	Disposition
		a)	

□ Table continued (Label as Attachment G)

XI. TAX INFORMATION

Has there been filed against the enterprise or has the enterprise been served with a complaint, lien, judgement, or other notice filed with any public body regarding the payment of any tax required under Federal, State or Local law?

🗌 No	☐ Yes If yo	ou answered Yes, o	complete the f	ollowing table:
Taxing Agency	Type of Tax	Date of Taxing Period (MM/YY)	Amount	Status/Disposition

□ Table continued (Label as Attachment H)

XII. **LITIGATION**

(A) Is your enterprise currently a party to any civil lawsuits?

> **Yes No**

If you answered "Yes", submit a description of all existing civil litigation to which the enterprise or any subsidiary is presently a party whether in this state or another jurisdiction. Include the following information: (Label as Attachment I1)

- 1. Official title or caption of the case
- 2. Docket or case number
- 3. Name and location of the court before which the case is pending
- 4. Identity of all parties to the litigation
- 5. General nature of all claims being made
- 6. Status/disposition
- **(B)** Has your enterprise been a party to any other litigation:
 - 1. in the previous ten years in which the enterprise or any of its officers, executives, or managers were accused of intentional misconduct?

□ No ☐ Yes 2. in which an ultimate decision adverse to the enterprise or any of its officers, executives or managers would have or could have a current or future effect on the enterprise?

 \Box No \Box Yes

3. in which an ultimate decision adverse to the enterprise or any of its officers, executives or managers could reasonable be expected to reflect upon the current or future financial responsibility or ability of the enterprise or the character, reputation, or integrity of the enterprise or any of its officers, executives or managers?

 \Box No \Box Yes

(C) Has any *owner, partner, director* ever been (for any offense): arrested, charged, indicted, tried, court martialed, plead no contest, or had any criminal record expunged in this or any other state or foreign country?

 \Box No \Box Yes

If you answered "Yes" to any of the above, submit the following: (Label as Attachment I2)

- 1. Official title or caption of the case
- 2. Docket or case number
- 3. Name and location of the court before which the case is pending
- 4. Identity of all parties to the litigation
- 5. General nature of all claims being made
- 6. Status/disposition
- (B) Has the enterprise ever had a judgment consent decree or consent order pertaining to a violation or alleged violation of the Federal Antitrust, Trade Regulation or Securities Laws, or similar laws of any state, province or country entered against it/ or has the enterprise been named as an un-indicted co-conspirator in any criminal proceeding in this state or any other jurisdiction?

 \Box No \Box Yes

If you answered Yes to Section XII C, submit the following: (Label as Attachment I3)

- 1. Official title or caption of the case
- 2. Docket or Case number
- 3. Name & Address of Court or Agency
- 4. Nature of Judgement
- 5. Decree or Order
- 6. Date Entered

XIII. REPRESENTATIVES

Submit the name, business address, and the telephone number of the enterprise's representatives for: (Label as Attachment J)

(A) Legal Services

(B) Registered or authorized agent upon whom services of process in any proceeding against the filing entity pursuant to applicable rules, regulations and/or Statutes of the State of New Mexico or proceeding in any court of the State including the United States District Court for the District of New Mexico may be made.

XIV. REGULATORY AGENCIES

Does a public or regulatory agency (other than gaming agencies) regulate the enterprise?

\Box No \Box Yes	If "Yes", complete the follo	wing chart:
Name and Location of Public	Type of Regulation	License No. or Other Identifying
Agency/Regulatory Agency		No.

(B) Has the enterprise (including parent, subsidiaries, directors and/or principals) ever applied in any jurisdiction for a license, permit or other authorization to participate in Indian gaming or other lawful gaming operations (*including manufacturer or distributor of gaming supplies & equipment, casino gaming, horse racing, dog racing, pari-mutuel operations, lottery, or sports betting*)?

🗌 No

Yes If Yes, submit the following information: (Label as Attachment K1)

Name & Address of Licensing Agency	License No.	Type of Gaming Activity	Status

(C) Has the enterprise ever had a complaint or other notice of pending disciplinary action from any jurisdiction?

- (D) Has the enterprise ever had any license or certificate issued by any jurisdiction denied, restricted, suspended, revoked or not renewed?
 No
 Yes
- (E) Has the enterprise ever withdrawn its application, license or certificate in any jurisdiction?

Yes

If you answered "Yes" to any of the questions above, submit the following information, include a statement describing the facts or circumstances: (Label as Attachment K2)

Name of Licensing Authority	Action Taken	Date of Action

XV. AGREEMENTS

(A) Has the enterprise entered into any written agreements with the Inn of the Mountain Gods Resort and Casino, Inn of the Mountain Gods Casino, Casino Apache or Casino Apache Travel Center?

 \Box No \Box Yes If "Yes", submit a copy of such an agreement. (Label as Attachment L1)

(B) Has the enterprise entered into any unwritten agreements with the Inn of the Mountain Gods Casino or Casino Apache?

□ No □ Yes If "Yes", submit a description of the terms of each agreement, including in said description the expected duration and terms of compensation of each such agreement. (Label as Attachment L2)

- (C) List the annual volume of business in terms of dollars the enterprise is doing or expects to do with The Inn of the Mountain Gods Casino and/or Casino Apache and the ending fiscal period.
- (**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 L3)
- (E) Are, or were, any agreements between this enterprise and the Inn of the Mountain Gods Casino or Casino Apache, in any way subject to or conditioned upon any other agreement between either Casino, its employees or either this enterprise or any other enterprise whatsoever?

No	Yes
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If "Yes", submit a list of each such agreement, explain the relationship and name the enterprise. (Label as Attachment L4)

(F) Are any of the suppliers, vendors or subcontractors of the enterprise, directly or indirectly, either holders of any securities or creditors as to any long or short term secured or unsecured debt of the enterprise?

No Yes If yes, identify the said suppliers, vendor or subcontractors, the nature of the interest or debt, and the amount thereof. (Label as attachment L5)

XVI. CERTIFICATION

I CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

I further understand that any false statements or misrepresentation of any information, as well as a failure to consent to the disclosures on any part of this application may be grounds for the denial and/or revocation of the enterprise's gaming license.

By:(Print Name)	(Title)		
(Signature) Subscribed and Sworn before me on this the	(Date)		
Seal)			
	Notary		

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

In witness whereof, I have	e executed this relea	se at		,	
		ase at, (city)			
	, on the	day of	······,	•	
(state)					
	_				
	<u> </u>	Signature			
~					
Subscribed and sworn to l	before me on the	day			
of	,	<u> </u>			
My commission expires:_					
Notary Public in and for t	he				
County of					
City of					
State of					

AUTHORIZATION FOR RELEASE OF INFORMATION

(Social Security #)

(DOB)

Presented to:		
I,		 ,

authorize any investigator, special agent, or other representative of the United States Department of Interior, Federal Bureau of Investigations, or any Tribal, State or local law enforcement or investigation agencies, in order to determine my suitability for involvement in Indian Gaming, to obtain any information requested related to my activities, including but not limited to; employment, schools, criminal justice agencies, property (real or personal), medical institutions, hospitals and health care professions, and other sources. The information includes, but not limited to; my academic, residential, performance, disciplinary, financial, employment and criminal history records, whether or not such information would otherwise be protected from disclosure by any constitutional, statutory or common law privilege.

I authorize custodians of such records and sources of information to release such information including permitting review and copying of any and all documents, records or correspondence pertaining to me, upon request of a representative of **The Mescalero Apache Tribal Gaming Commission**, regardless of any previous agreement to the contrary.

I agree to accept any risk of adverse public notice, embarrassment, criticism or financial loss that may result from use of information that is obtained in connection with a background investigation for the purpose listed in this document.

I agree to indemnify and hold harmless any person to whom this request is lawfully presented including his agents and employees from and against all claims, damages, losses, and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request.

I understand that the information released by records custodians and other sources of information is for required background investigations to process my application for a gaming license for providing gaming goods or services to the gaming operation, as required by **The Mescalero Apache Tribal Gaming Commission**.

Signature

(Name)

Date

This instrument was acknowledged before me on the

_____day of ______, _____,

My commission expires:

Notary Public in and for the

County of

City of

State of