



Charitable Bingo Operations Division

Individual Statement of Certification

(Rev. 4/11)

WHO MUST SUBMIT THIS SCHEDULE

All applicants for a manufacturer or distributor license, and those currently licensed, must submit this schedule to disclose all officers, directors, partners, LLC members, sole owner, partners, credit interest holders, shareholders holding more than ten percent (10%) of any class of stock, a foreign corporation's registered agent for service, and representative/agents. This schedule would also be used to add position(s) to individuals previously disclosed by an organization.

FORM SUBMISSION

By mail: Charitable Bingo Operations Division, Texas Lottery Commission, PO Box 16630, Austin, TX 78761-6630

Via Fax: (512) 344-5142

FOR ASSISTANCE in completing this form, please call 1-800-BINGO-77 (1-800-246-4677) or visit our Web site at www.txbingo.org.

GENERAL INSTRUCTIONS

- Please print legibly or type.
Individuals holding position(s) marked with an asterisk (*) require the submission of an FBI or DPS fingerprint card when being disclosed for the first time.
Please complete each item of the form. We are unable to process forms with illegible, missing, or incomplete information.
Only one business contact for an organization may be named at any given time.
Please attach a detailed explanation for every item where you respond "YES."
This form must be signed by the individual and the signature notarized.

Name of Organization Taxpayer Number

Name (LAST, FIRST, MIDDLE INITIAL)

Social Security Number Driver's License Number State

Home Address (Street Address, PO Box, or Rural Route)

City State ZIP Code Phone Number (Area Code & Number)

Race Gender Date of Birth (MM, DD, YYYY) E-mail Address (optional)

Position (Check all that apply) 01 - Sole Owner* 02 - Partner* 03 - Director* 04 - Officer* 05 - Shareholder* 09 - Business Contact (one per org.) 10 - Representative/Agent 11 - Credit Interest Holder 13 - LLC Member* 19 - Registered Agent for Service*

BACKGROUND INFORMATION

I, Name (FIRST, MIDDLE INITIAL, LAST) swear and affirm that I am the person identified above.

- 1. Have you ever been convicted of a felony, criminal fraud, gambling, or a gambling related offense? YES NO
If "YES," have less than ten (10) years elapsed since the termination of your sentence, parole, mandatory supervision, or probation served for that offense? YES NO
2. Have you even been convicted of a misdemeanor involving moral turpitude? YES NO
(Misdemeanors involving moral turpitude include offenses such as forgery, perjury, receiving stolen property, theft, or any other offense knowingly contrary to honesty and good morals).
If "YES," have less than ten (10) years elapsed since the termination of your sentence, parole, mandatory supervision, or probation served for that offense? YES NO

BACKGROUND INFORMATION (CONT'D)

- 3. Are you or have you ever been a professional gambler or gambling promoter? YES NO
- 4. Are you an elected or appointed public officer? YES NO
- 5. Are you a public employee? YES NO
- 6. Are you an owner, officer, director, shareholder, agent, or employee of a commercial lessor? YES NO
- 7. Do you conduct, promote, administer, or assist in conducting, promoting, or administering Bingo games for which a license is required by the Bingo Enabling Act, Chapter 2001, Occupations Code? YES NO
- 8. Have you ever had a license to manufacture, distribute, or supply bingo equipment, devices, or supplies revoked within the preceding year by any other state or jurisdiction? YES NO
- 9. Are you an owner, officer, director, shareholder of, or a person holding an equitable or credit interest in another licensed distributor or manufacturer? YES NO
- 10. Are you required to be named in another application for a manufacturer, distributor or lessor license? YES NO
- 11. Can any person related to you in the first degree by blood or through marriage (mother, father, siblings, spouse, children, mother-in-law, father-in-law, spouse's siblings, spouse's children) answer "Yes" to any of the above questions? YES NO

AUTHORIZATION FOR EXAMINATION & RELEASE OF INFORMATION FOR USE IN ASSESSMENT OF BINGO LICENSE

I _____, do hereby authorize a review, full disclosure, and release of any and all records concerning myself to any duly authorized officer, agent, or employee of the Texas Lottery Commission, whether the records are public, private, or confidential in nature with the following understanding:

- 1. The information reviewed, disclosed, and/or released to the Texas Lottery Commission may be used by the Lottery Commission for any lawful purpose and/or to determine the applicant's qualifications to be licensed as provided in the Bingo Enabling Act, Chapter 2001, Occupations Code.
- 2. If this authorization is not sufficient to obtain access to certain records, it is understood that I may be requested to execute some other appropriate authorization.
- 3. A photocopy of this authorization will have the same force and effect as the original.

AFFIDAVIT OF RESPONSIBILITY

I am fully aware that this certification is a government document, and under penalties of perjury, I declare that all the information in this document is true and correct. I agree that I will notify the Charitable Bingo Operations Division, Texas Lottery Commission of any changes in the information provided above within fourteen (14) days of the change as defined in Section 2001.211 of the Bingo Enabling Act.

Dated _____ A.D. (Year).
MM DD YYYY

sign here ▶

Name of Candidate

Candidate's Name _____
Print

DBA _____
Print

Sworn and subscribed before, me, a Notary Public, on this _____ day of _____ A.D. (Year).

My commission expires _____ A.D. (Year).
MM/DD/YYYY

sign here ▶

Notary Public