



Pennsylvania Gaming Control Board

SLOT OPERATOR AND MANAGEMENT COMPANY - APPLICATION AND DISCLOSURE INFORMATION RENEWAL FORM

INSTRUCTIONS

PENNSYLVANIA GAMING IS GOVERNED BY THE LAWS SET FORTH IN 4 PA.C.S. PART II, ENACTED BY THE ACT OF JULY 5, 2004 (P.L. 572, No. 71) THE PENNSYLVANIA RACE HORSE DEVELOPMENT AND GAMING ACT (ACT) AS AMENDED AND 58 PA. CODE PART VII, GAMING CONTROL BOARD (REGULATIONS).

THESE INSTRUCTIONS ARE APPLICABLE TO ANY "PERSON" SEEKING TO BE RENEWED AS A CATEGORY 1, CATEGORY 2, CATEGORY 3 (COLLECTIVELY REFERRED TO HEREAFTER AS SLOT OPERATOR) OR MANAGEMENT COMPANY. PLEASE BE ADVISED THAT NO PERSON, ITS AFFILIATE, INTERMEDIARY, SUBSIDIARY OR HOLDING COMPANY THAT HAS APPLIED FOR OR IS A HOLDER OF A SLOT MACHINE LICENSE, SHALL BE ELIGIBLE TO APPLY FOR OR HOLD A SUPPLIER OR MANUFACTURER LICENSE.

AS USED IN THESE INSTRUCTIONS, THE PHRASE "AFFILIATED ENTITIES" SHALL MEAN A SLOT OPERATOR'S OR MANAGEMENT COMPANY'S AFFILIATES, INTERMEDIARIES, SUBSIDIARIES AND HOLDING COMPANIES. SLOT MACHINE OPERATORS ARE SUBJECT TO THE REQUIREMENTS OF §§ 1302 AND 1303 (EXCLUSIVELY FOR CATEGORY 1), 1304 (EXCLUSIVELY FOR CATEGORY 2), 1305 (EXCLUSIVELY FOR CATEGORY 3) AND 1309 (ALL CATEGORIES) OF THE GAMING ACT.

THE ORIGINAL FORM, ONE PAPER COPY, AND ONE (1) COMPACT DISC (CD) CONTAINING ALL FORMS MUST BE SENT TO THE PENNSYLVANIA GAMING CONTROL BOARD, BUREAU OF LICENSING, 303 WALNUT STREET, FIFTH FLOOR, VERIZON TOWER, HARRISBURG, PENNSYLVANIA 17101 WITH THE APPROPRIATE FEE. PLEASE REFER TO THE LICENSING SECTION OF THE BOARD'S WEBSITE FOR CD FORMATTING REQUIREMENTS.

1. SLOT OPERATOR AND MANAGEMENT COMPANY RENEWAL APPLICATION PACKAGE FORMS

THE FORMS THAT MAKE UP A RENEWAL APPLICATION PACKAGE FOR A SLOT OPERATOR OR MANAGEMENT COMPANY LICENSE ARE AS FOLLOWS:

- A. SLOT OPERATOR AND MANAGEMENT COMPANY APPLICATION AND DISCLOSURE INFORMATION RENEWAL FORM** (TO BE COMPLETED BY ONLY THE LICENSEE AND MANAGEMENT COMPANY)
- B. PENNSYLVANIA PERSONAL HISTORY DISCLOSURE RENEWAL FORM**
(TO BE COMPLETED BY EACH NATURAL PERSON WHO IS A PRINCIPAL OR KEY EMPLOYEE AS DEFINED IN 58 PA. CODE §401A.3).
- C. PRINCIPAL AFFILIATE/PRINCIPAL ENTITY RENEWAL FORM**
(TO BE COMPLETED BY EACH ENTITY THAT IS A PRINCIPAL AFFILIATE OR PRINCIPAL ENTITY AS DEFINED IN 58 PA. CODE §433A.1).
- D. INSTITUTIONAL INVESTOR NOTICE OF OWNERSHIP FORM**
(TO BE COMPLETED BY AN INSTITUTIONAL INVESTOR THAT HAS FILED AND WILL REMAIN ELIGIBLE TO FILE A STATEMENT OF BENEFICIAL OWNERSHIP (13G) WITH THE SEC).

2. RENEWAL APPLICATION AND LICENSING FEES

A. APPLICATION FEES AND INVESTIGATION DEPOSITS

APPLICATION FEES MUST BE SUBMITTED WITH THE APPLICATION PACKAGE. THESE FEES ARE NON-REFUNDABLE DEPOSITS THAT WILL BE USED BY THE BOARD TO PROCESS AND INVESTIGATE THE SLOT OPERATOR OR MANAGEMENT COMPANY LICENSEE AND THE LICENSEE'S AFFILIATED ENTITIES AND PERSONS FILING FORMS AS PART OF THE APPLICATION PACKAGE. APPLICATION FEES MUST BE SUBMITTED FOR EACH LICENSEE, AFFILIATED ENTITY AND PERSON, UNLESS OTHERWISE NOTED.

THE FEES INDICATED ARE NON-REFUNDABLE DEPOSITS REQUIRED TO COVER THE REASONABLE AND NECESSARY COSTS OF THE BACKGROUND INVESTIGATION. NO ADDITIONAL COSTS OR

EXPENSES RELATED TO THE BACKGROUND INVESTIGATION WILL BE BILLED, UNLESS AN INVESTIGATOR IS REQUIRED TO TRAVEL IN OVERNIGHT STATUS OR STENOGRAPHIC SERVICES ARE REQUIRED. IN EITHER CASE, ACTUAL COSTS INCURRED BY THE BOARD SHALL BE REIMBURSED BY THE APPLICANT.

SLOT OPERATOR OR MANAGEMENT COMPANY LICENSEE	\$5,000.00
LICENSEE'S AFFILIATED ENTITIES	\$2,500.00
PRINCIPAL/KEY EMPLOYEES	\$2,500.00
PRINCIPAL ENTITY	\$2,500.00

B. LICENSING FEES

LICENSING FEES MUST BE PAID PRIOR TO ISSUANCE OF THE LICENSE.

CATEGORY 1 SLOT MACHINE LICENSE	N/A
CATEGORY 2 SLOT MACHINE LICENSE	N/A
CATEGORY 3 SLOT MACHINE LICENSE	N/A
CATEGORY 1 OR 2 MANAGEMENT COMPANY LICENSE	\$1,500,000/3 YEAR LICENSE
CATEGORY 3 MANAGEMENT COMPANY LICENSE	\$150,000/3 YEAR LICENSE

FEES SHALL BE PAID BY MONEY ORDER OR CHECK MADE PAYABLE TO THE "PENNSYLVANIA GAMING CONTROL BOARD."

3. APPLICATION FORM INSTRUCTIONS

GENERALLY

AS USED IN THE SLOT OPERATOR OR MANAGEMENT COMPANY FORM, THE WORDS "LICENSEE" AND "YOU" SHALL MEAN THE SLOT OPERATOR OR MANAGEMENT COMPANY LICENSEE. WHEN LICENSEE'S AFFILIATED ENTITIES ARE COMPLETING THE FORM, "LICENSEE" AND "YOU" SHALL REFER TO THE AFFILIATED ENTITY COMPLETING THE FORM.

ALL ENTRIES ON THE FORM MUST BE TYPED OR PRINTED IN BLOCK LETTERING. INITIALS AND SIGNATURES MUST BE HANDWRITTEN BY THE PERSON PROVIDING THE INFORMATION. IF THE ANSWERS ARE NOT LEGIBLE, THE APPLICATION MAY NOT BE ACCEPTED.

READ EACH QUESTION CAREFULLY PRIOR TO ANSWERING. ANSWER EVERY QUESTION COMPLETELY. DO NOT LEAVE BLANK SPACES. IF A QUESTION DOES NOT APPLY TO THE LICENSEE, WRITE "DOES NOT APPLY" IN RESPONSE TO THAT QUESTION. IF A SCHEDULE OR ADDENDUM DOES NOT APPLY TO THE LICENSEE, WRITE "DOES NOT APPLY" ON THE SCHEDULE OR ADDENDUM.

APPENDICES ARE TO BE PROVIDED BY THE LICENSEE. THE REQUIRED APPENDICES ARE LISTED ON THE APPLICATION CHECKLIST. APPENDICES MUST BE PRESENTED IN A TABBED MANNER. EACH TAB MUST INDICATE THE APPENDIX NUMBER. IMMEDIATELY FOLLOWING THE TAB, LICENSEE MUST INSERT A PAGE WITH THE APPENDIX NUMBER AND ALL INFORMATION APPLICABLE TO THE APPENDIX. IF AN APPENDIX DOES NOT APPLY TO THE LICENSEE, WRITE "DOES NOT APPLY" ON THE APPENDIX PAGE.

ALL PAGES OF THE FORM MUST BE INITIALED BY THE LICENSEE, OR IF THE LICENSEE IS NOT A NATURAL PERSON, THE PERSON AUTHORIZED TO COMPLETE THE FORM ON BEHALF OF THE LICENSEE MUST INITIAL EACH PAGE. IF ADDITIONAL PAGES ARE REQUIRED IN ORDER TO ANSWER ANY QUESTION, ADDITIONAL PAGES MAY BE UTILIZED AND MUST BE ATTACHED TO THE FORM. BE SURE TO INDICATE THE NUMBER(S) OF THE QUESTION(S) BEING ANSWERED AND INITIAL EACH ADDITIONAL PAGE. SOME SCHEDULES MAY REQUIRE DISCLOSURE OF INFORMATION FOR MORE THAN ONE NATURAL PERSON OR ENTITY OR TYPE OF

INFORMATION. IF THERE ARE MULTIPLE DISCLOSURES, MAKE ENOUGH ADDITIONAL COPIES OF THE BLANK SCHEDULE AND COMPLETE IT FOR EACH NATURAL PERSON OR ENTITY OR TYPE OF INFORMATION.

ALL REQUIRED DOCUMENTATION, SUCH AS BUSINESS FORMATION PAPERS, TAX RETURNS AND APPENDICES, AS WELL AS THE APPLICATION FORMS THAT COMPRISE AN APPLICATION PACKAGE FOR A SLOT OPERATOR OR MANAGEMENT COMPANY LICENSE, AS LISTED ABOVE, MUST BE SUBMITTED AT THE TIME OF FILING THIS FORM. FURTHER, PURSUANT TO 58 PA. CODE §§ 421A.1(G) AND 423A.1(E), THE LICENSEE IS UNDER A CONTINUING DUTY TO PROMPTLY NOTIFY THE BOARD IF THERE IS A CHANGE IN THE INFORMATION PROVIDED TO THE BOARD.

ADDITIONAL FINANCIAL INFORMATION WILL BE REQUESTED AS NEEDED.

SHOULD YOU BE UNABLE TO UNDERSTAND THIS FORM FULLY IN ENGLISH, IT IS YOUR RESPONSIBILITY TO ACQUIRE ADEQUATE MEANS OF TRANSLATION. IF YOU SUBMIT A DOCUMENT TO THE BOARD THAT IS IN A LANGUAGE OTHER THAN ENGLISH, YOU MUST ALSO SUBMIT AN ENGLISH TRANSLATION COMPLIANT WITH 58 PA. CODE §423A.1(H).

ALL NOTICES REGARDING YOUR APPLICATION WILL BE SENT TO THE ADDRESS YOU PROVIDE ON THIS FORM. YOU MUST IMMEDIATELY NOTIFY THE BOARD IF YOU CHANGE YOUR ADDRESS.

FAILURE TO ANSWER ANY QUESTION COMPLETELY AND TRUTHFULLY WILL RESULT IN DENIAL OF YOUR APPLICATION AND/OR REVOCATION OF YOUR LICENSE AND MAY SUBJECT YOU TO CRIMINAL PENALTIES UNDER 18 PA.C. S. A. §4903.

ANY PERSON WHO APPLIES FOR AND OBTAINS A LICENSE, REGISTRATION, CERTIFICATE OR PERMIT FROM THE BOARD MAY BE REQUIRED TO SUBMIT TO WARRANTLESS SEARCHES WHEN PRESENT IN A LICENSED GAMING FACILITY PURSUANT TO THE ACT.

CONFIDENTIAL INFORMATION (AS DEFINED IN 58 PA. CODE §401A.3) SUPPLIED TO THE BOARD OR OTHERWISE OBTAINED SHALL NOT BE REVEALED EXCEPT IN THE COURSE OF THE NECESSARY ADMINISTRATION OF THE GAMING ACT, OR UPON THE LAWFUL ORDER OF A COURT OF COMPETENT JURISDICTION OR, WITH THE APPROVAL OF THE ATTORNEY GENERAL, TO A DULY AUTHORIZED LAW ENFORCEMENT AGENCY. A LICENSE APPLICANT OR HOLDER WAIVES ANY LIABILITY OF THE COMMONWEALTH OF PENNSYLVANIA AND ITS INSTRUMENTALITIES AND AGENTS FOR ANY DAMAGES RESULTING FROM ANY DISCLOSURE OR PUBLICATION IN ANY MANNER, OTHER THAN A WILLFULLY UNLAWFUL DISCLOSURE OR PUBLICATION.

PURSUANT TO 58 PA. CODE § 423A.5, ONCE THE APPLICATION HAS BEEN FILED, THE LICENSEE MAY ONLY WITHDRAW ITS APPLICATION BY FILING A PETITION WITH THE BOARD SEEKING PERMISSION TO WITHDRAW.

A LICENSE ISSUED BY THE BOARD IS A REVOCABLE PRIVILEGE. NO PERSON HOLDING A LICENSE, IS DEEMED TO HAVE ANY PROPERTY RIGHTS RELATED TO THE LICENSE.

AN APPLICATION THAT HAS BEEN ACCEPTED FOR FILING AND ALL RELATED MATERIALS SUBMITTED TO THE BOARD BECOME THE PROPERTY OF THE BOARD AND WILL NOT BE RETURNED TO THE LICENSEE.

LICENSEE INFORMATION

THE LICENSEE INFORMATION PAGE MUST BE COMPLETED IN ITS ENTIRETY.

LICENSEE'S BUSINESS NAME			
BUSINESS NAME AS IT APPEARS ON LICENSEE'S CERTIFICATE OF INCORPORATION, CHARTER, BYLAWS, PARTNERSHIP AGREEMENT OR OTHER OFFICIAL DOCUMENTS (SPELL OUT COMPLETE NAME, DO NOT USE ABBREVIATIONS)			
TRADE NAME(S) AND DOING BUSINESS AS ("DBA") NAMES			
HAS THE APPLICANT BEEN VERIFIED AS A MINORITY OR WOMEN'S BUSINESS ENTERPRISE BY THE PENNSYLVANIA DEPARTMENT OF GENERAL SERVICES (DGS) BUREAU OF SMALL BUSINESS OPPORTUNITIES? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, PROVIDE THE NAME OF THE ENTITY THAT CERTIFIED THE APPLICANT AS A MINORITY OR WOMEN'S BUSINESS ENTERPRISE AND UPON WHICH THE DGS VERIFICATION WAS MADE. _____ IF YES, ATTACH THE VERIFICATION LETTER FROM THE BUREAU OF SMALL BUSINESS OPPORTUNITIES AND/OR THE SMALL BUSINESS PROCUREMENT INITIATIVE CERTIFICATE THAT IDENTIFIES THE COMPANY AS A SMALL DIVERSE BUSINESS (NOT ONLY AS A SMALL BUSINESS) AND PROVIDE THE CERTIFICATION NUMBER _____.			
CONTACT NAME FOR THIS RENEWAL FORM			
FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX (JR., SR., ETC.)
TITLE		INDIVIDUAL EMAIL ADDRESS	
PHONE NUMBER		FAX NUMBER	
DOCKET #: _____ DATE OF MOST RECENT APPLICATION SUBMISSION: _____			
LICENSEE'S MAIN ADDRESS			
ADDRESS LINE 1			
ADDRESS LINE 2			
ADDRESS LINE 3			
CITY		TOWNSHIP	COUNTY
STATE/PROVINCE		POSTAL CODE	
COUNTRY	EMAIL ADDRESS		WEB URL
PHONE NUMBER		FAX NUMBER	
LICENSEE'S ADDRESS IN PENNSYLVANIA (IF APPLICABLE)			
ADDRESS LINE 1			
ADDRESS LINE 2			
ADDRESS LINE 3			
CITY		TOWNSHIP	COUNTY
STATE/PROVINCE		POSTAL CODE	
COUNTRY	EMAIL ADDRESS		WEB URL
PHONE NUMBER		FAX NUMBER	

LICENSEE'S IDENTIFICATION NUMBERS		
FEDERAL EMPLOYER IDENTIFICATION NUMBER/TIN	PA UNEMPLOYMENT COMPENSATION ACCOUNT NUMBER	
PA DEPARTMENT OF REVENUE CORPORATE Box NUMBER	PA LIQUOR CONTROL BOARD LICENSE NUMBER	
PA WORKERS' COMPENSATION POLICY NUMBER	PA DEPARTMENT OF STATE – ENTITY NUMBER	
DOES THE LICENSEE HAVE ANY OUTSTANDING TAX LIABILITIES TO EITHER THE COMMONWEALTH OF PENNSYLVANIA OR ANY OTHER STATE OR THE FEDERAL GOVERNMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YOU ANSWER YES, PROVIDE DETAILS CONCERNING ALL OUTSTANDING TAX LIABILITIES.		
LICENSEE'S BILLING CONTACT INFORMATION		
FIRST NAME	LAST NAME	SUFFIX (JR., SR., ETC.)
TITLE		INDIVIDUAL EMAIL ADDRESS
ADDRESS		
CITY	STATE/PROVINCE	POSTAL CODE
PHONE NUMBER		FAX NUMBER
LICENSEE'S FORM OF ORGANIZATION		
CHECK ONE		
<input type="checkbox"/> SOLE PROPRIETORSHIP	<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> LIMITED PARTNERSHIP
<input type="checkbox"/> LIMITED LIABILITY COMPANY	<input type="checkbox"/> S-CORPORATION	<input type="checkbox"/> TRUST
<input type="checkbox"/> OTHER (DESCRIBE) _____		
TYPE OF LICENSE RENEWAL		
<input type="checkbox"/> CATEGORY 1	<input type="checkbox"/> CATEGORY 1 AFFILIATE	
<input type="checkbox"/> CATEGORY 2	<input type="checkbox"/> CATEGORY 2 AFFILIATE	
<input type="checkbox"/> CATEGORY 3	<input type="checkbox"/> CATEGORY 3 AFFILIATE	
<input type="checkbox"/> MANAGEMENT COMPANY	<input type="checkbox"/> MANAGEMENT COMPANY AFFILIATE	

APPENDICES

THE APPENDICES ARE DOCUMENTS THE LICENSEE MUST PROVIDE OR CREATE. EACH APPENDIX SHALL BE PRESENTED IN A TABBED MANNER AND EACH TAB MUST INDICATE THE APPENDIX NUMBER AS LISTED BELOW. IF AN APPENDIX DOES NOT APPLY OR HAS NOT BEEN UPDATED SINCE THE MOST RECENT APPLICATION SUBMISSION, WRITE “DOES NOT APPLY” OR “NO UPDATE” ON THE APPENDIX PAGE. THE CHART BELOW ADVISES THE REQUIREMENTS FOR EACH APPENDIX AS MANDATORY, IF APPLICABLE, ETC.

<input type="checkbox"/>	APPENDIX 1: DESCRIPTION OF ANY NEW VENTURES ENTERED INTO BY LICENSEE SINCE YOUR MOST RECENT APPLICATION SUBMISSION. FURTHER, A DESCRIPTION OF ANY CESSATION OF BUSINESS SINCE YOUR MOST RECENT APPLICATION SUBMISSION. PLEASE PROVIDE SPECIFICS.	MANDATORY
<input type="checkbox"/>	APPENDIX 2: DESCRIPTION OF NEW OR UPDATED BONUS, PROFIT SHARING, PENSION, RETIREMENT, DEFERRED COMPENSATION AND SIMILAR PLANS SINCE YOUR MOST RECENT APPLICATION SUBMISSION. THIS INFORMATION MUST BE PROVIDED IN ADDITION TO THE INFORMATION PROVIDED IN <u>SCHEDULE 6</u> .	MANDATORY
<input type="checkbox"/>	APPENDIX 3: DESCRIPTION OF NEW OR CHANGED LONG TERM DEBT SINCE YOUR MOST RECENT APPLICATION SUBMISSION. THIS INFORMATION MUST BE PROVIDED IN ADDITION TO THE INFORMATION PROVIDED IN <u>SCHEDULES 12 AND 13</u> .	MANDATORY
<input type="checkbox"/>	APPENDIX 4: DESCRIPTION OF ANY NEW OTHER INDEBTEDNESS OR ANY CHANGES TO EXISTING OTHER INDEBTEDNESS SINCE YOUR MOST RECENT APPLICATION SUBMISSION. THIS INFORMATION MUST BE PROVIDED IN ADDITION TO THE INFORMATION PROVIDED IN <u>SCHEDULES 14 AND 15</u> .	MANDATORY
<input type="checkbox"/>	APPENDIX 5: DESCRIPTION OF ANY NEW SECURITIES OPTIONS OR CHANGES TO EXISTING SECURITIES OPTION AGREEMENTS SINCE YOUR MOST RECENT APPLICATION SUBMISSION. THIS INFORMATION MUST BE PROVIDED IN ADDITION TO THE INFORMATION PROVIDED IN <u>SCHEDULES 16 AND 17</u> . APPENDIX MUST INCLUDE A DETAILED DESCRIPTION OF THE CREATION OF ANY NEW OPTIONS AND ANY MODIFICATIONS TO THE OPTIONS PREVIOUSLY ISSUED BY THE LICENSEE. NOTE: FOR THE PURPOSE OF THIS APPENDIX, OPTION SHALL MEAN RIGHT, WARRANT, OR OPTION TO SUBSCRIBE TO OR PURCHASE ANY SECURITIES ISSUED BY LICENSEE.	MANDATORY
<input type="checkbox"/>	APPENDIX 6: DESCRIPTION OF ANY NEW OR UPDATES TO EXISTING LITIGATION SINCE YOUR MOST RECENT APPLICATION SUBMISSION. APPENDIX MUST INCLUDE A DESCRIPTION OF ALL EXISTING CIVIL LITIGATION TO WHICH LICENSEE, ITS PARENT, AFFILIATE, OR SUBSIDIARY IS PRESENTLY A PARTY, WHETHER IN THIS COMMONWEALTH OR IN ANOTHER JURISDICTION. DO NOT INCLUDE ANY LITIGATION IN WHICH THE DAMAGES MAY NOT REASONABLY BE EXPECTED TO EXCEED \$100,000, OR LITIGATION IN WHICH DAMAGES MAY BE EXPECTED TO EXCEED \$100,000, BUT WHICH INVOLVES CLAIMS AGAINST LICENSEE, WHICH ARE FULLY AND COMPLETELY COVERED UNDER AN INSURANCE POLICY HELD BY THE LICENSEE WITH A LICENSED INSURANCE CARRIER. THIS DESCRIPTION MUST INCLUDE THE TITLE AND DOCKET NUMBER OF THE LITIGATION, THE NAME AND LOCATION OF THE COURT BEFORE WHICH IT IS PENDING, THE IDENTITY OF ALL PARTIES TO THE LITIGATION AND THE GENERAL NATURE OF ALL CLAIMS BEING MADE.	MANDATORY
<input type="checkbox"/>	APPENDIX 7: ANNUAL REPORTS FOR THE LAST YEAR.	MANDATORY
<input type="checkbox"/>	APPENDIX 8: A LISTING OF ALL SEC FILINGS SINCE YOUR MOST RECENT APPLICATION SUBMISSION. THE LISTING SHOULD INCLUDE THE SEC FORM NUMBER, A BRIEF DESCRIPTION, AND DATE OF FILING.	IF APPLICABLE
<input type="checkbox"/>	APPENDIX 9: A COPY OF THE LAST QUARTERLY UNAUDITED FINANCIAL STATEMENT. THE FINANCIAL STATEMENTS MUST BE ACCOMPANIED BY A CERTIFICATION SIGNED BY THE LICENSEE'S CHIEF FINANCIAL OFFICER AND CHIEF OPERATING OFFICER. THE FINANCIAL STATEMENT CERTIFICATION IS ATTACHED. THE FINANCIAL STATEMENTS MUST INCLUDE A BALANCE SHEET, A STATEMENT OF INCOME, A STATEMENT OF CHANGES IN EQUITY AND A CASH FLOW STATEMENT.	MANDATORY

<input type="checkbox"/>	APPENDIX 10: COPIES OF ALL OTHER REPORTS PREPARED IN THE LAST YEAR BY INDEPENDENT AUDITORS OF THE LICENSEE.	MANDATORY
<input type="checkbox"/>	APPENDIX 11: PROVIDE UPDATED CERTIFIED COPIES OF THE ARTICLES OF INCORPORATION, CHARTER, BYLAWS, PARTNERSHIP AGREEMENT, OR OTHER OFFICIAL DOCUMENTS AND ALL AMENDMENTS AND PROPOSED AMENDMENTS.	REQUIRED ONLY IF CHANGED SINCE MOST RECENT APPLICATION SUBMISSION
<input type="checkbox"/>	APPENDIX 12: CURRENT OWNERSHIP TABLE OF ORGANIZATION.	MANDATORY
<input type="checkbox"/>	APPENDIX 13: FUNCTIONAL TABLE OF ORGANIZATION FOR LICENSEE WITH JOB DESCRIPTIONS, AND NAMES OF EMPLOYEES EARNING IN EXCESS OF \$250,000 IN ANNUAL COMPENSATION.	MANDATORY
<input type="checkbox"/>	APPENDIX 14: PROVIDE COPIES OF ANY ANNUAL FEDERAL TAX RETURN (INCLUDING BUT NOT LIMITED TO FORMS 1041, 1065, 1120, 1120S), ANNUAL PENNSYLVANIA TAX RETURNS AND ANNUAL FOREIGN TAX RETURNS FILED SINCE YOUR MOST RECENT APPLICATION SUBMISSION. INCLUDE ALL STATEMENTS, SCHEDULES, AND ATTACHMENTS FILED AS PART OF THE ORIGINAL RETURN. FEDERAL CONSOLIDATED RETURNS SHOULD INCLUDE ALL CONSOLIDATING STATEMENTS.	MANDATORY
<input type="checkbox"/>	APPENDIX 15: DESCRIBE ANY UPDATES TO CRIMINAL HISTORY OF LICENSEE SINCE YOUR MOST RECENT APPLICATION SUBMISSION. THIS INFORMATION MUST BE PROVIDED IN ADDITION TO THE INFORMATION PROVIDED IN SCHEDULE 21 . NARRATIVE INFORMATION ABOUT THE NATURE OF CHARGE OR COMPLAINT AND THE DISPOSITION MUST BE PROVIDED.	MANDATORY
<input type="checkbox"/>	APPENDIX 16: PROVIDE AN UPDATED PLAN OR SUMMARY, WITH DETAILS, FOR THE FOLLOWING: <ul style="list-style-type: none"> ○ PROVIDE A SUMMARY OF THE SUCCESS OF THE LICENSEE IN DEVELOPING TOURISM FACILITIES ANCILLARY TO GAMING DEVELOPMENT. ○ PROVIDE AN UPDATE ON LICENSEE'S JOB CREATION PROGRESS TO DATE AND PLAN FOR FUTURE CREATION OF QUALITY, LIVING WAGE JOBS AND FULL TIME PERMANENT JOBS FOR RESIDENTS OF THIS COMMONWEALTH GENERALLY AND FOR RESIDENTS OF THE HOST POLITICAL SUBDIVISION IN PARTICULAR. ○ PROVIDE AN UPDATE OF THE LICENSEE'S PROGRESS IN MEETING COMMITMENTS TO LOCAL AGENCIES AND COMMUNITY BASED ORGANIZATIONS. ○ PROVIDE AN UPDATE OF THE POTENTIAL ADVERSE EFFECTS, WHICH MIGHT RESULT FROM THE PROJECT INCLUDING COSTS OF MEETING THE INCREASED DEMAND FOR PUBLIC HEALTH CARE, CHILD CARE, PUBLIC TRANSPORTATION, AFFORDABLE HOUSING AND SOCIAL SERVICES. 	MANDATORY
<input type="checkbox"/>	APPENDIX 17: PURSUANT TO §481A.5 OF THE BOARD REGULATIONS, A REGULATED ENTITY SHALL FILE A REPORT WITH THE BOARD CONCERNING THE PERFORMANCE OF ITS DIVERSITY PLAN. THE REPORT SHALL CONTAIN THE FOLLOWING INFORMATION: (1) EMPLOYMENT DATA, INCLUDING INFORMATION ON THE FOLLOWING: (I) MINORITY AND WOMEN REPRESENTATION IN THE REGULATED ENTITY'S WORKFORCE IN ALL JOB CLASSIFICATIONS. (II) SALARY INFORMATION. (III) RECRUITMENT AND TRAINING INFORMATION, INCLUDING EXECUTIVE AND MANAGERIAL LEVEL RECRUITMENT TRAINING. (IV) RETENTION AND OUTREACH EFFORTS. (2) THE TOTAL NUMBER AND VALUE OF ALL CONTRACTS OR TRANSACTIONS AWARDED BY THE REGULATED ENTITY FOR GOODS AND SERVICES. (3) THE TOTAL NUMBER AND VALUE OF ALL CONTRACTS OR TRANSACTIONS AWARDED BY THE REGULATED ENTITY TO MINORITY AND WOMEN'S BUSINESS ENTERPRISES. (4) A LIST OF EACH CONTRACT OR TRANSACTION AWARDED BY THE REGULATED ENTITY TO A MINORITY OR WOMEN'S BUSINESS ENTERPRISE AND THE ACTUAL VALUE OF EACH CONTRACT OR TRANSACTION. (5) THE TOTAL NUMBER AND VALUE OF ALL CONTRACTS AWARDED THAT CONTAIN A PARTICIPATION PLAN. (6) THE TOTAL NUMBER AND VALUE OF ALL SUBCONTRACTS AWARDED TO MINORITY AND WOMEN'S BUSINESS ENTERPRISES UNDER CONTRACTS CONTAINING A PARTICIPATION PLAN. (7) A LIST OF EACH SUBCONTRACT AWARDED	MANDATORY

	TO A MINORITY OR WOMEN'S BUSINESS ENTERPRISE UNDER CONTRACTS CONTAINING A PARTICIPATION PLAN AND THE ACTUAL VALUE OF EACH SUBCONTRACT. (8) A COMPREHENSIVE DESCRIPTION OF ALL EFFORTS MADE BY THE REGULATED ENTITY TO MONITOR AND ENFORCE THE PARTICIPATION PLAN. (9) INFORMATION ON MINORITY AND WOMEN INVESTMENT, EQUITY OWNERSHIP, AND OTHER OWNERSHIP OR MANAGEMENT OPPORTUNITIES INITIATED OR PROMOTED BY THE REGULATED ENTITY. (10) OTHER INFORMATION REQUESTED IN WRITING BY THE BOARD TO ENSURE COMPLIANCE WITH THE ACT AND THIS PART. (D) A REGULATED ENTITY MAY REQUEST THAT PROPRIETARY INFORMATION REQUIRED TO BE SUBMITTED TO THE BOARD UNDER THIS SECTION BE TREATED AS CONFIDENTIAL INFORMATION. A REGULATED ENTITY SHALL CLEARLY MARK INFORMATION THAT IT REQUESTS TO BE TREATED AS CONFIDENTIAL INFORMATION.	
<input type="checkbox"/>	APPENDIX 18: PURSUANT TO §1512 OF THE GAMING ACT, NO EXECUTIVE-LEVEL STATE EMPLOYEE, PUBLIC OFFICIAL, PARTY OFFICER OR IMMEDIATE FAMILY MEMBER THEREOF SHALL HAVE A FINANCIAL INTEREST IN OR BE EMPLOYED, DIRECTLY OR INDIRECTLY, BY ANY LICENSED RACING ENTITY OR LICENSED GAMING ENTITY, OR ANY HOLDING, AFFILIATE, INTERMEDIARY OR SUBSIDIARY COMPANY, THEREOF, OR ANY SUCH APPLICANT. HAS ANY PUBLIC OFFICIAL OR OTHER PROHIBITED PERSON POSSESSED A FINANCIAL INTEREST IN OR BEEN EMPLOYED DIRECTLY OR INDIRECTLY BY THE APPLICANT OR RELATED ENTITY AT OR FOLLOWING THE EFFECTIVE DATE OF THE PA GAMING ACT? <input type="checkbox"/> Yes <input type="checkbox"/> No	MANDATORY

CATEGORY 1 LICENSEES ONLY

<input type="checkbox"/>	APPENDIX 19: PROVIDE AN UPDATED PLAN OR SUMMARY OF THE MANAGEMENT AND USE OF BACKSIDE AREA IMPROVEMENT AND MAINTENANCE ACCOUNTS UNDER §1404 OF THE GAMING ACT (RELATING TO DISTRIBUTION FROM LICENSEE'S REVENUE RECEIPTS).	CATEGORY 1 LICENSEE ONLY
<input type="checkbox"/>	APPENDIX 20: PROVIDE A VERIFICATION FROM THE HORSE RACING COMMISSION OR THE HARNESS RACING COMMISSION STATING THAT THE LICENSEE HAS SATISFIED THE LIVE RACING REQUIREMENTS UNDER §1303(B) OF THE GAMING ACT.	CATEGORY 1 LICENSEE ONLY
<input type="checkbox"/>	APPENDIX 21: IF UTILIZING A TEMPORARY FACILITY, PROVIDE DETAILS OF THE PLAN TO TRANSITION TO A PERMANENT FACILITY, INCLUDING A DATE FOR COMPLETION OF THE PERMANENT FACILITY.	CATEGORY 1 LICENSEE ONLY

MANAGEMENT COMPANY LICENSEES ONLY

<input type="checkbox"/>	APPENDIX 22: PROVIDE A COPY OF THE MOST RECENT MANAGEMENT CONTRACT AS OUTLINED IN 58 PA. CODE §440.A.5	MANAGEMENT COMPANY ONLY
<input type="checkbox"/>	APPENDIX 23: PROVIDE A COPY OF THE MOST RECENT BUSINESS PLAN WHICH SETS FORTH THE PARTIES' GOALS AND OBJECTIVES FOR THE TERM OF THE MANAGEMENT CONTRACT	MANAGEMENT COMPANY ONLY

SCHEDULE 1: OTHER NAMES USED BY LICENSEE

LIST ALL OTHER NAMES UNDER WHICH LICENSEE HAS DONE BUSINESS AND GIVE APPROXIMATE TIME PERIODS DURING WHICH NAME WAS USED.

ENTITY TRADE & DBA NAMES				
NAME	TRADE NAME/DOING BUSINESS As (DBA)	NAME USED FROM	NAME USED TO	EMPLOYER IDENTIFICATION NUMBER/TIN

SCHEDULE 2: ADDRESSES CURRENTLY USED BY LICENSEE

PLEASE PROVIDE ALL ADDRESSES CURRENTLY USED BY LICENSEE.

ADDRESSES				
ADDRESS PURPOSE				
ADDRESS LINE 1		ADDRESS LINE 2		
ADDRESS LINE 3		CITY	STATE/PROVINCE	POSTAL CODE
COUNTRY	EMAIL ADDRESS		PHONE NUMBER	FAX NUMBER
ADDRESS PURPOSE				
ADDRESS LINE 1		ADDRESS LINE 2		
ADDRESS LINE 3		CITY	STATE/PROVINCE	POSTAL CODE
COUNTRY	EMAIL ADDRESS		PHONE NUMBER	FAX NUMBER

SCHEDULE 6: BONUS, PROFIT SHARING, PENSION RETIREMENT, DEFERRED COMPENSATION & SIMILAR PLANS

PROVIDE ANY NEW INFORMATION AND ATTACH A DESCRIPTION OF PLANS AS APPENDIX 2.

PLAN			
TITLE OR NAME OF PLAN			
PLAN TRUSTEE NAME & ADDRESS			
TRUSTEE NAME			
ADDRESS LINE 1		ADDRESS LINE 2	
ADDRESS LINE 3		CITY	STATE/PROVINCE
POSTAL CODE	COUNTRY		EMAIL ADDRESS
PHONE NUMBER		FAX NUMBER	
PLAN SPECIFICATIONS			
MATERIAL FEATURES OF THE PLAN			
METHODS OF FINANCING PLAN			
CLASS OF PERSONS IN PLAN	NUMBER OF INDIVIDUALS IN EACH CLASS	AMOUNT DISTRIBUTED TO EACH CLASS OF PERSONS DURING THE LAST FISCAL YEAR THE PLAN WAS IN EFFECT	

SCHEDULE 7: STOCK DESCRIPTION (FOR C CORPORATIONS, S-CORPORATIONS, LLCs)

PROVIDE THE FOLLOWING INFORMATION FOR ALL OF LICENSEE'S STOCK.

STOCK TYPES/CLASSES INVENTORY					
STOCK TYPE OR CLASS	NUMBER OF SHARES AUTHORIZED	NUMBER OF SHARES ISSUED	NUMBER OF SHARES OUTSTANDING	VOTING?	TERMS, CONDITIONS, RIGHTS AND PRIVILEGES
				<input type="checkbox"/> YES <input type="checkbox"/> NO	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	
<p>IF THE RIGHT OF HOLDERS OF ANY CLASS OF STOCK MAY BE MODIFIED OTHERWISE THAN BY A VOTE OF A MAJORITY OR MORE OF OUTSTANDING SHARES SO AFFECTED, VOTING AS A CLASS, SO STATE AND EXPLAIN BRIEFLY.</p>					

SCHEDULE 9: INTEREST OF CURRENT PARTNERS (FOR PARTNERSHIPS, LLPs, LIMITED PARTNERSHIPS)

PROVIDE THE FOLLOWING INFORMATION FOR EACH PARTNER.

PARTNERSHIP INTEREST				
NAME	PARTNER TYPE (GENERAL/FULL PARTNERS, LIMITED PARTNERS, DORMANT/ SILENT/SECRET PARTNER, NOMINAL PARTNER, OTHER)	PERCENTAGE OF OWNERSHIP IN LICENSEE	PARTNERSHIP PARTICIPATION FROM	DESCRIPTION OF PARTICIPATION IN THE OPERATION OF THE LICENSEE

SCHEDULE 10: INTEREST OF FORMER PARTNERS (FOR PARTNERSHIPS, LLPs, LIMITED PARTNERSHIPS)

PROVIDE THE FOLLOWING INFORMATION FOR EACH FORMER PARTNER SINCE YOUR MOST RECENT APPLICATION SUBMISSION.

FORMER PARTNERSHIP INTEREST					
NAME	PARTNER TYPE (GENERAL/FULL PARTNERS, LIMITED PARTNERS, DORMANT/ SILENT/SECRET PARTNER, NOMINAL PARTNER, OTHER)	PERCENTAGE OF OWNERSHIP IN LICENSEE	PARTNERSHIP PARTICIPATION FROM – TO	DESCRIPTION OF PARTICIPATION IN THE OPERATION OF THE LICENSEE	REASONS FOR AND TERMS OF SEPARATION

SCHEDULE 12: LONG TERM DEBT

DESCRIBE THE NATURE, TYPE, COVENANTS AND PRIORITIES OF ALL OUTSTANDING BONDS, LOANS, MORTGAGES, TRUST DEEDS, NOTES, DEBENTURES OR OTHER FORMS OF INDEBTEDNESS ISSUED OR EXECUTED (INCLUDING LOANS MADE BY SHAREHOLDERS), OR TO BE ISSUED OR EXECUTED, BY THE LICENSEE, WHICH MATURE MORE THAN ONE (1) YEAR FROM THE DATE OF ISSUANCE OR WHICH, BY THEIR TERMS, ARE RENEWABLE FOR A PERIOD OF MORE THAN ONE (1) YEAR FROM THE DATE OF ISSUANCE. ATTACH DESCRIPTIONS AND DOCUMENTATIONS OF NEW LONG TERM DEBT ENTERED INTO SINCE YOUR MOST RECENT APPLICATION SUBMISSION AS APPENDIX 3. PLEASE FILL OUT THE CHART BELOW BUT ONLY SUBMIT DOCUMENTATION OF ANY AMENDMENTS MADE TO PREVIOUSLY REPORTED LONG TERM DEBT.

LONG TERM DEBT INSTRUMENT							
LINE	LONG TERM DEBT INSTRUMENT TYPE	ISSUE DATE	REPAYMENT DUE DATE	PRINCIPAL	ANNUAL INTEREST RATE	RENEWABLE? (YES OR NO)	DOCUMENTATION ATTACHED? (YES OR NO)
TERMS, COVENANTS, CONDITIONS AND PRIORITIES FOR THIS DEBT INSTRUMENT							
LONG TERM DEBT INSTRUMENT							
LINE	LONG TERM DEBT INSTRUMENT TYPE	ISSUE DATE	REPAYMENT DUE DATE	PRINCIPAL	ANNUAL INTEREST RATE	RENEWABLE? (YES OR NO)	DOCUMENTATION ATTACHED? (YES OR NO)
TERMS, COVENANTS, CONDITIONS AND PRIORITIES FOR THIS DEBT INSTRUMENT							
LONG TERM DEBT INSTRUMENT							
LINE	LONG TERM DEBT INSTRUMENT TYPE	ISSUE DATE	REPAYMENT DUE DATE	PRINCIPAL	ANNUAL INTEREST RATE	RENEWABLE? (YES OR NO)	DOCUMENTATION ATTACHED? (YES OR NO)
TERMS, COVENANTS, CONDITIONS AND PRIORITIES FOR THIS DEBT INSTRUMENT							

SCHEDULE 13: HOLDERS OF LONG TERM DEBT

PROVIDE THE FOLLOWING INFORMATION FOR EACH PERSON OR ENTITY HOLDING ANY OUTSTANDING BONDS, LOANS, MORTGAGES, TRUST DEEDS, NOTES, DEBENTURES OR OTHER FORMS OF INDEBTEDNESS EXECUTED OR ISSUED BY LICENSEE, WHICH MATURE MORE THAN ONE (1) YEAR FROM THE DATE OF ISSUANCE OR WHICH, BY THEIR TERMS, ARE RENEWABLE FOR A PERIOD OF MORE THAN ONE (1) YEAR FROM THE DATE OF ISSUANCE.

NAME AND ADDRESS				
FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX (JR., SR., ETC.)	DATE OF BIRTH
ENTITY NAME				
ADDRESS LINE 1		ADDRESS LINE 2		
ADDRESS LINE 3		CITY	STATE/PROVINCE	POSTAL CODE
COUNTRY	EMAIL ADDRESS		PHONE NUMBER	FAX NUMBER

LONG TERM DEBT HELD BY PERSON NAMED ABOVE			
PAGE	LINE	TYPE AND CLASS OF DEBT	DOLLAR AMOUNT OF DEBT HELD

SCHEDULE 14: OTHER INDEBTEDNESS

DESCRIBE THE NATURE, TYPE, TERMS, CONDITIONS AND COVENANTS OF ALL OUTSTANDING LOANS, MORTGAGES, TRUST DEEDS, PLEDGES, LINES OF CREDIT, OR OTHER EVIDENCE OF INDEBTEDNESS UTILIZED BY LICENSEE OTHER THAN THOSE DESCRIBED IN SCHEDULE 12. ATTACH DESCRIPTION AND DOCUMENTATION AS APPENDIX 4.

OTHER INDEBTEDNESS

SCHEDULE 15: HOLDER OF OTHER INDEBTEDNESS

PROVIDE THE FOLLOWING INFORMATION FOR EACH HOLDER OF ANY OUTSTANDING LOAN, MORTGAGE, TRUST DEED, PLEDGE OR OTHER EVIDENCE OF INDEBTEDNESS UTILIZED BY LICENSEE AND DESCRIBED IN RESPONSE TO SCHEDULE 14.

NAME AND ADDRESS				
FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX (JR., SR., ETC.)	DATE OF BIRTH
ENTITY NAME				
ADDRESS LINE 1		ADDRESS LINE 2		
ADDRESS LINE 3		CITY	STATE/PROVINCE	POSTAL CODE
COUNTRY	EMAIL ADDRESS	PHONE NUMBER	FAX NUMBER	
TYPE OF DEBT INSTRUMENT HELD		DOLLAR AMOUNT OF DEBT HELD (BOTH ORIGINAL AND CURRENT BALANCE)		
NAME AND ADDRESS				
FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX (JR., SR., ETC.)	DATE OF BIRTH
ENTITY NAME				
ADDRESS LINE 1		ADDRESS LINE 2		
ADDRESS LINE 3		CITY	STATE/PROVINCE	POSTAL CODE
COUNTRY	EMAIL ADDRESS	PHONE NUMBER	FAX NUMBER	
TYPE OF DEBT INSTRUMENT HELD		DOLLAR AMOUNT OF DEBT HELD (BOTH ORIGINAL AND CURRENT BALANCE)		

SCHEDULE 16: SECURITIES OPTIONS

PROVIDE INFORMATION RELATING TO THE CREATION OF ANY NEW OPTIONS AND ATTACH AS APPENDIX 5 A DETAILED DESCRIPTION OF SUCH OPTION AND ANY MODIFICATIONS TO THE OPTIONS PREVIOUSLY ISSUED BY THE LICENSEE SINCE YOUR MOST RECENT APPLICATION SUBMISSION. **NOTE:** FOR THE PURPOSE OF THIS SCHEDULE, OPTION SHALL MEAN RIGHT, WARRANT OR OPTION TO SUBSCRIBE TO OR PURCHASE ANY SECURITIES ISSUED BY LICENSEE.

SECURITY OPTION				
OPTION NAME	SECURITY TYPE OR CLASS OPTIONED	OPTION GRANT YEARS	OPTION EXPIRATION DATE	COPY OF OPTION PLAN OR PROXY STATEMENT ATTACHED AS APPENDIX 5? <input type="checkbox"/> YES <input type="checkbox"/> NO
CONDITIONS UNDER WHICH OPTION HOLDER MAY BECOME OR WILL BECOME ENTITLED TO EXERCISE OPTIONS				
SECURITY OPTION				
OPTION NAME	SECURITY TYPE OR CLASS OPTIONED	OPTION GRANT YEARS	OPTION EXPIRATION DATE	COPY OF OPTION PLAN OR PROXY STATEMENT ATTACHED AS APPENDIX 5? <input type="checkbox"/> YES <input type="checkbox"/> NO
CONDITIONS UNDER WHICH OPTION HOLDER MAY BECOME OR WILL BECOME ENTITLED TO EXERCISE OPTIONS				
SECURITY OPTION				
OPTION NAME	SECURITY TYPE OR CLASS OPTIONED	OPTION GRANT YEARS	OPTION EXPIRATION DATE	COPY OF OPTION PLAN OR PROXY STATEMENT ATTACHED AS APPENDIX 5? <input type="checkbox"/> YES <input type="checkbox"/> NO
CONDITIONS UNDER WHICH OPTION HOLDER MAY BECOME OR WILL BECOME ENTITLED TO EXERCISE OPTIONS				

SCHEDULE 19: STOCK HELD BY LICENSEE

PROVIDE THE FOLLOWING INFORMATION WITH RESPECT TO EACH COMPANY IN WHICH LICENSEE HOLDS STOCK.

NAME & ADDRESS OF COMPANY	TYPE OF STOCK HELD	EXCHANGE	PURCHASE PRICE PER SHARE	NUMBER OF SHARES HELD	% OF OWNERSHIP IF MORE THAN 5%	TERMS, CONDITIONS, RIGHTS AND PRIVILEGES	VOTING? <input type="checkbox"/> YES <input type="checkbox"/> NO
							<input type="checkbox"/> YES <input type="checkbox"/> NO
							<input type="checkbox"/> YES <input type="checkbox"/> NO
							<input type="checkbox"/> YES <input type="checkbox"/> NO
							<input type="checkbox"/> YES <input type="checkbox"/> NO
							<input type="checkbox"/> YES <input type="checkbox"/> NO
							<input type="checkbox"/> YES <input type="checkbox"/> NO
							<input type="checkbox"/> YES <input type="checkbox"/> NO

SCHEDULE 20: INSIDER TRANSACTIONS

PROVIDE THE FOLLOWING INFORMATION FOR EACH CHANGE IN THE BENEFICIAL OWNERSHIP OF THE EQUITY SECURITIES OF LICENSEE ON THE PART OF ANY PERSON WHO IS INDIRECTLY OR DIRECTLY A BENEFICIAL OWNER OF MORE THAN TEN PERCENT (10%) OF ANY CLASS OF AN EQUITY SECURITY OF LICENSEE OR WHO IS OR WAS WITHIN THAT PERIOD A DIRECTOR OR OFFICER OF LICENSEE THAT OCCURRED SINCE YOUR MOST RECENT APPLICATION SUBMISSION. INCLUDE CHANGES RESULTING FROM (A) GIFT, (B) PURCHASE, (C) SALE, (D) EXERCISE OF AN OPTION TO PURCHASE, (E) EXERCISE OF AN OPTION TO SELL, (F) GRANT OR RECEIPT OF A PUT OR (G) GRANT OR RECEIPT OF A CALL.

NAME AND HOME ADDRESS				
FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX (JR., SR., ETC.)	DATE OF BIRTH
ADDRESS LINE 1		ADDRESS LINE 2		
ADDRESS LINE 3		CITY	STATE/PROVINCE	POSTAL CODE
COUNTRY	EMAIL ADDRESS		PHONE NUMBER	FAX NUMBER
POSITION				
INSIDER TRANSACTION DESCRIPTION				
DATE OF TRANSACTION	NATURE OF TRANSACTION	NUMBER OF SHARES INVOLVED	DOLLAR VALUE OF TRANSACTION	OTHER PARTIES (NAMES & POSITIONS)

CRIMINAL HISTORY

THE NEXT SECTION ASKS ABOUT ANY OFFENSES OR CHARGES LICENSEE OR ANY OF ITS OFFICERS, DIRECTORS/PARTNERS OR TRUSTEES MAY HAVE COMMITTED OR HAD FILED AGAINST THEM. PRIOR TO ANSWERING THIS QUESTION, CAREFULLY REVIEW THE DEFINITIONS AND INSTRUCTIONS THAT FOLLOW.

DEFINITIONS - FOR PURPOSES OF THIS SECTION:

- A. "CRIME OR OFFENSE" INCLUDES ALL FELONIES AND MISDEMEANORS, AS WELL AS SUMMARY OFFENSES THAT MAY HAVE REQUIRED YOU TO APPEAR BEFORE A LAW ENFORCEMENT AGENCY, STATE OR FEDERAL GRAND JURY, JUSTICE COURT, MUNICIPAL COURT, CITY COURT, TRAFFIC COURT, MILITARY COURT OR ANY OTHER COURT EXCEPT JUVENILE COURT. INCLUDE ALL DUI/DWI OFFENSES.
- B. "ARREST" INCLUDES ANY TIME THAT YOU WERE STOPPED BY A POLICE OFFICER OR OTHER LAW ENFORCEMENT OFFICER AND ADVISED THAT YOU WERE UNDER ARREST, DETAINED, HELD FOR QUESTIONING, REQUESTED BY A POLICE OFFICER OR LAW ENFORCEMENT OFFICER TO COME TO A POLICE STATION AND ANSWER QUESTIONS, TAKEN INTO CUSTODY BY ANY POLICE OFFICER OR OTHER LAW ENFORCEMENT OFFICER, FINGERPRINTED, HELD IN JAIL, OR INSTRUCTED TO APPEAR IN COURT OR SUBPOENAED TO ANSWER FOR CONDUCT WHICH IS A CRIME AS HAS BEEN DEFINED IN PARAGRAPH "A."
- C. "CHARGE" INCLUDES ANY INDICTMENT, COMPLAINT, INFORMATION, SUMMONS, CITATION OR OTHER NOTICE OF THE ALLEGED COMMISSION OF ANY CRIME OR OFFENSE AS DEFINED IN PARAGRAPH "A."

INSTRUCTIONS:

- A. ANSWER "**YES**" AND PROVIDE ALL INFORMATION TO THE BEST OF YOUR ABILITY **EVEN IF:** YOU DID NOT COMMIT THE OFFENSE CHARGED; THE ARREST OR CHARGES WERE DISMISSED OR THE CHARGES WERE SUBSEQUENTLY DOWNGRADED TO A LESSER CHARGE; YOU PLEADED NOT GUILTY OR NOLO CONTENDERE; YOU COMPLETED AN ACCELERATED REHABILITATIVE DISPOSITION ("ARD") OR EQUIVALENT DIVERSIONARY PROGRAM; THE CHARGES OR CONVICTION WERE EXPUNGED FROM YOUR RECORD, EVEN IF YOU HAVE EXPUNGEMENT PAPERS; YOU WERE NOT CONVICTED OR WERE FOUND "NOT GUILTY"; YOU DID NOT SERVE ANY TIME IN PRISON OR JAIL; THE ARRESTS, CHARGES OR OFFENSES HAPPENED A LONG TIME AGO; YOU WERE ARRESTED OR CHARGED IN ANOTHER STATE (A STATE OTHER THAN PENNSYLVANIA); YOU WERE NEVER PHYSICALLY TAKEN INTO CUSTODY AND/OR TRANSPORTED TO A POLICE STATION OR JAIL.
- B. ANSWER "**NO**" IF: YOU HAVE NEVER BEEN ARRESTED OR CHARGED WITH ANY CRIME OR OFFENSE; YOUR ARREST HAPPENED WHEN YOU WERE UNDER 18 YEARS OF AGE AND YOUR COURT APPEARANCE WAS IN JUVENILE COURT.

SCHEDULE 21: CRIMINAL HISTORY

SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS LICENSEE OR ANY OF ITS OFFICERS, DIRECTORS/PARTNERS OR TRUSTEES BEEN INDICTED, CHARGED WITH OR CONVICTED OF A CRIMINAL OFFENSE OR BEEN A PARTY TO OR NAMED AS AN UNINDICTED CO-CONSPIRATOR IN ANY CRIMINAL PROCEEDING IN THE COMMONWEALTH OR ANY OTHER JURISDICTION? **FAILURE TO FULLY ANSWER THIS QUESTION MAY RESULT IN THE DENIAL OF YOUR RENEWAL APPLICATION.** IF YES, COMPLETE THE FOLLOWING CHART. YES NO

CRIMINAL HISTORY INCIDENT						
NAME OF CASE & DOCKET NUMBER	NATURE OF CHARGE OR COMPLAINT	DATE OF CHARGE OR COMPLAINT	DISPOSITION (ACQUITTED, CONVICTED, DISMISSED, ETC.)	NAME AND ADDRESS OF LAW ENFORCEMENT AGENCY OR COURT INVOLVED	SENTENCE	NAME OF OFFICER, DIRECTOR/PARTNER, TRUSTEE, KEY EMPLOYEE OR PRINCIPAL

SCHEDULE 22: TESTIMONY, INVESTIGATIONS OR POLYGRAPHS

SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS ANY OF LICENSEE'S OFFICERS, DIRECTORS/PARTNERS OR TRUSTEES BEEN CALLED TO TESTIFY BEFORE, BEEN THE SUBJECT OF AN INVESTIGATION CONDUCTED BY, OR REQUESTED TO TAKE A POLYGRAPH EXAM BY ANY GOVERNMENTAL AGENCY, COURT, COMMITTEE, GRAND JURY OR INVESTIGATORY BODY (MUNICIPAL, STATE, COUNTY, PROVINCIAL, FEDERAL, NATIONAL, ETC.) OTHER THAN IN RESPONSE TO MINOR TRAFFIC RELATED OFFENSES? IF YES, COMPLETE THE FOLLOWING CHART. YES NO

TESTIMONY, INVESTIGATION OR POLYGRAPH INCIDENT			
NAME AND ADDRESS OF COURT OR AGENCY	WAS TESTIMONY GIVEN? <input type="checkbox"/> YES <input type="checkbox"/> NO	DATE ON WHICH TESTIMONY WAS GIVEN	APPROXIMATE TIME PERIOD OF INVESTIGATION
NATURE OF PROCEEDINGS OR INVESTIGATION AND NAME OF OFFICER, DIRECTOR/PARTNER, TRUSTEE, KEY EMPLOYEE OR PRINCIPAL INVOLVED.			

SCHEDULE 23: ANTITRUST, TRADE REGULATION & SECURITY JUDGMENTS; STATUTORY AND REGULATORY VIOLATIONS

A. SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS LICENSEE, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES OR HOLDING COMPANIES HAD A JUDGMENT, ORDER, 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? YES NO

B. SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS LICENSEE, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES OR HOLDING COMPANIES HAD A JUDGMENT, ORDER, CONSENT DECREE OR CONSENT ORDER PERTAINING TO ANY STATE OR FEDERAL STATUTE, REGULATION OR CODE THAT RESULTED IN A FINE OR PENALTY OF \$50,000 OR MORE ENTERED AGAINST IT? YES NO

IF YOU ANSWER YES TO EITHER QUESTION A OR B, COMPLETE THE FOLLOWING CHART.

VIOLATION		
NAME OF CASE & DOCKET NUMBER	DATE OF JUDGMENT, ORDER OR DECREE	NAME AND ADDRESS OF AGENCY OR COURT INVOLVED
NATURE OF OFFENSE		
DISPOSITION <input type="checkbox"/> ACQUITTED <input type="checkbox"/> CONVICTED <input type="checkbox"/> DISMISSED <input type="checkbox"/> OTHER _____		
NATURE OF JUDGMENT, DECREE OR ORDER		

SCHEDULE 24: BANKRUPTCY OR INSOLVENCY PROCEEDINGS

A. SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS LICENSEE, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES OR HOLDING COMPANIES HAD ANY PETITION UNDER ANY PROVISION OF THE FEDERAL BANKRUPTCY CODE OR UNDER ANY STATE INSOLVENCY LAW FILED BY OR AGAINST IT? YES NO

B. SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS LICENSEE, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES OR HOLDING COMPANIES SOUGHT RELIEF UNDER ANY PROVISION OF THE FEDERAL BANKRUPTCY CODE OR UNDER ANY STATE INSOLVENCY LAW? YES NO

C. SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS A COURT APPOINTED ANY RECEIVER, FISCAL AGENT, TRUSTEE, REORGANIZATION TRUSTEE, OR SIMILAR OFFICER FOR LICENSEE, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES OR HOLDING COMPANIES? YES NO

IF YOU ANSWER YES TO QUESTIONS A-C, COMPLETE THE FOLLOWING CHART.

BANKRUPTCY OR INSOLVENCY PROCEEDINGS			
NAME OF CASE & DOCKET NUMBER	DATE PETITION FILED OR RELIEF SOUGHT	NAME AND ADDRESS OF AGENCY OR COURT INVOLVED	
	DATE JUDGMENT OR RELIEF ENTERED	NAME OF COURT APPOINTED RECEIVER, AGENT OR TRUSTEE	DATE RECEIVER, AGENT OR TRUSTEE APPOINTED
NATURE OF JUDGMENT OR RELIEF			

SCHEDULE 26: GAMING LICENSES AND PERMITS

SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS LICENSEE, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES OR HOLDING COMPANIES APPLIED FOR ANY LICENSE OR PERMIT BY A GOVERNMENT AGENCY CHARGED WITH REGULATING GAMES OF CHANCE, INCLUDING BUT NOT LIMITED TO SLOT MACHINES, VIDEO LOTTERY TERMINALS, TABLE GAMES, HORSE RACING, JAI ALAI, ETC.? A GOVERNMENT AGENCY AS USED HERE INCLUDES ANY FEDERAL, STATE, NATIVE AMERICAN OR LOCAL GOVERNMENT CREATED TO CARRY OUT A GOVERNMENTAL FUNCTION OR TO IMPLEMENT A STATUTE OR STATUTES. IF YES, COMPLETE THE FOLLOWING CHART. YES NO

LICENSING (GOVERNMENT ISSUED –GAMING)					
TYPE OF LICENSE OR PERMIT	NAME AND LOCATION OF GOVERNMENT AGENCY	APPLICATION NUMBER	DISPOSITION	DATE OF DISPOSITION	IF GRANTED, PROVIDE THE LICENSE/PERMIT NUMBER AND EXPIRATION DATE. IF DENIED, PENDING, EXPIRED, SUSPENDED, CONDITIONED, WITHDRAWN OR REVOKED, PROVIDE DETAILS.

SCHEDULE 27: LICENSEE’S CONTRIBUTIONS AND DISBURSEMENTS

- A. SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS LICENSEE, ITS PARENT COMPANY, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES, HOLDING COMPANIES, DIRECTORS, OFFICERS, EMPLOYEES OR ANY THIRD PARTIES ACTING FOR OR ON BEHALF OF LICENSEE MADE ANY BRIBES OR KICKBACKS OR MADE ANY PAYMENTS ALLEGED TO HAVE BEEN BRIBES OR KICKBACKS TO ANY EMPLOYEE, PERSON, COMPANY OR ORGANIZATION TO OBTAIN FAVORABLE TREATMENT? Yes No
- B. SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS LICENSEE, ITS PARENT COMPANY, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES, HOLDING COMPANIES, DIRECTORS, OFFICERS, EMPLOYEES OR ANY THIRD PARTIES ACTING FOR OR ON BEHALF OF THE LICENSEE MADE ANY BRIBES OR KICKBACKS OR MADE ANY PAYMENTS ALLEGED TO HAVE BEEN BRIBES OR KICKBACKS TO ANY GOVERNMENT OFFICIAL, DOMESTIC OR FOREIGN TO OBTAIN FAVORABLE TREATMENT? Yes No
- C. SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS LICENSEE, ITS PARENT COMPANY, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES, HOLDING COMPANIES, DIRECTORS, OFFICERS, EMPLOYEES OR ANY THIRD PARTIES ACTING FOR OR ON BEHALF OF LICENSEE LOANED FUNDS FOR THE PURPOSE OF OPPOSING OR SUPPORTING ANY GOVERNMENT, POLITICAL PARTY, CANDIDATE OR COMMITTEE, EITHER DOMESTIC OR FOREIGN? Yes No
- D. SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS LICENSEE, ITS PARENT COMPANY, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES, HOLDING COMPANIES, DIRECTORS, OFFICERS, EMPLOYEES OR ANY THIRD PARTIES ACTING FOR OR ON BEHALF OF LICENSEE DONATED OR LOANED PROPERTY OR ANY OTHER THING OF VALUE, INCLUDING CASH, FOR THE PURPOSE OF OPPOSING OR SUPPORTING ANY GOVERNMENT, POLITICAL PARTY, CANDIDATE OR COMMITTEE, EITHER DOMESTIC OR FOREIGN? Yes No
- E. SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS LICENSEE, ITS PARENT COMPANY, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES OR HOLDING COMPANIES MADE ANY LOANS, DONATIONS OR OTHER DISBURSEMENTS TO DIRECTORS, OFFICERS, EMPLOYEES OR ANY THIRD PARTIES FOR THE PURPOSE OF REIMBURSING SUCH INDIVIDUALS FOR POLITICAL CONTRIBUTIONS EITHER FOREIGN OR DOMESTIC? Yes No
- F. SINCE THE DATE OF THE LICENSEE’S LAST APPLICATION SUBMISSION, HAS LICENSEE, ITS PARENT COMPANY, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES OR HOLDING COMPANIES FORMED OR CAUSED TO BE FORMED, A POLITICAL ACTION COMMITTEE EITHER UNDER FEDERAL OR STATE ELECTION LAWS? Yes No
- G. AS A RESULT OF THE CITIZEN’S UNITED V. FEC DECISION, HAS LICENSEE, ITS PARENT COMPANY, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES OR HOLDING COMPANIES MADE “INDEPENDENT EXPENDITURES”, AS DEFINED IN SEC. 1621(E) OF THE PENNSYLVANIA ELECTION CODE, FOR THE PURPOSE OF INFLUENCING AN ELECTION COVERED BY THE PENNSYLVANIA ELECTION CODE? Yes No
- H. SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS LICENSEE, ITS PARENT COMPANY, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES OR HOLDING COMPANIES MAINTAINED ANY BANK ACCOUNT, DOMESTIC OR FOREIGN, NOT REFLECTED ON THE LICENSEE’S BOOKS OR RECORDS? Yes No
- I. SINCE YOUR MOST RECENT APPLICATION SUBMISSION, HAS LICENSEE, ITS PARENT COMPANY, OR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES OR HOLDING COMPANIES MAINTAINED ANY NUMBERED ACCOUNT OR ANY ACCOUNT IN THE NAME OF A NOMINEE FOR LICENSE? Yes No

IF YES, TO QUESTIONS A-G COMPLETE THE FOLLOWING CHART.

NAME AND ADDRESS			
FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX (JR., SR., ETC.)
ADDRESS LINE 1		ADDRESS LINE 2	
CITY	STATE/PROVINCE	POSTAL CODE	COUNTRY
EMAIL ADDRESS		PHONE NUMBER	FAX NUMBER
NATURE OF CONTRIBUTIONS OR DISBURSEMENTS			
NAME AND ADDRESS			
FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX (JR., SR., ETC.)
ADDRESS LINE 1		ADDRESS LINE 2	
CITY	STATE/PROVINCE	POSTAL CODE	COUNTRY
EMAIL ADDRESS		PHONE NUMBER	FAX NUMBER
NATURE OF CONTRIBUTIONS OR DISBURSEMENTS			

APPLICATION FOR PENNSYLVANIA TAX CLEARANCE REVIEW

COMPLETION OF THIS FORM IS A CONDITION OF THIS APPLICATION AND WILL AUTHORIZE THE PENNSYLVANIA DEPARTMENT OF REVENUE ("DOR") AND THE DEPARTMENT OF LABOR AND INDUSTRY ("DLI") TO REVIEW THE TAX RECORDS OF THE PERSON AND/OR ENTITY AS PART OF THE LICENSING EVALUATION BY THE PENNSYLVANIA GAMING CONTROL BOARD ("BOARD"). YOUR SIGNATURE ON THIS FORM ALSO REPRESENTS A WAIVER OF CONFIDENTIALITY OF TAX INFORMATION. YOUR SIGNATURE ALLOWS THE DOR AND DLI TO PROVIDE TAX INFORMATION TO THE BOARD AND ITS AUTHORIZED INVESTIGATORY AGENTS.

NAME AS LISTED ON TAX RETURN

EMPLOYER IDENTIFICATION NUMBER/TAX
IDENTIFICATION NUMBER

ADDRESS

CITY

STATE

ZIP CODE

SINCE THE TAX RECORDS ARE FOR AN ENTITY, I CERTIFY THAT I AM THE AUTHORIZED SIGNATORY FOR THE LICENSEE.

SIGNATURE OF CEO/AUTHORIZED SIGNATORY*

TELEPHONE NUMBER

DATE

PRINTED NAME OF CEO/AUTHORIZED SIGNATORY - TITLE

*IF A PERSON OTHER THAN THE CEO OF THIS ENTITY IS DESIGNATED TO EXECUTE THIS DOCUMENT, THE BOARD MUST BE PROVIDED WITH A RESOLUTION OR AN AFFIDAVIT, CERTIFIED AS TRUE AND CORRECT, IDENTIFYING THE INDIVIDUAL SO DESIGNATED, AUTHORIZING THAT INDIVIDUAL TO EXECUTE THE DOCUMENT ON BEHALF OF BOTH THE ENTITY AND THE CEO.

AFFIDAVIT

STATE OF _____ :
 : SS
COUNTY OF _____ :

THE CHIEF EXECUTIVE OFFICER ("CEO")/LICENSEE HEREBY CERTIFIES THAT THE INFORMATION PROVIDED HEREIN IS TRUE AND CORRECT AND THAT THERE IS NO MISREPRESENTATION, FALSIFICATION OR OMISSION IN THE APPLICATION. FURTHER, THE CEO/LICENSEE IS AWARE THAT ANY FALSE OR MISLEADING STATEMENT OR OMITTED INFORMATION WILL BE CAUSE FOR REJECTION OR REVOCATION OF A LICENSE, REGISTRATION, CERTIFICATE OR PERMIT AND MAY BE SUBJECT TO CRIMINAL PENALTIES UNDER 18 PA. C.S.A. §§ 4902, 4903 AND 4904.

THE LICENSEE HAS FAMILIARIZED ITSELF WITH THE CONTENTS OF THE GAMING ACT AND ITS REGULATIONS AND AGREES, IF LICENSED, TO ABIDE BY SAME, AND SPECIFICALLY AGREES AND AFFIRMS THE FOLLOWING:

THE BUREAU OF INVESTIGATIONS AND ENFORCEMENT ("BIE"), THE DEPARTMENT OF REVENUE ("DOR") AND THE PENNSYLVANIA STATE POLICE ("PSP") SHALL HAVE THE AUTHORITY, WITHOUT NOTICE AND WITHOUT WARRANT, TO DO ALL OF THE FOLLOWING IN THE PERFORMANCE OF THEIR DUTIES:

1. INSPECT AND EXAMINE ALL PREMISES WHERE SLOT MACHINE AND TABLE GAME OPERATIONS ARE CONDUCTED, GAMING DEVICES OR EQUIPMENT ARE MANUFACTURED, SOLD, DISTRIBUTED OR SERVICED OR WHERE RECORDS OF THESE ACTIVITIES ARE PREPARED OR MAINTAINED.
2. INSPECT ALL EQUIPMENT AND SUPPLIES IN, ABOUT, UPON OR AROUND PREMISES REFERRED TO IN PARAGRAPH 1.
3. SEIZE, SUMMARILY REMOVE AND IMPOUND EQUIPMENT AND SUPPLIES FROM PREMISES REFERRED TO IN PARAGRAPH 1 FOR THE PURPOSES OF EXAMINATION AND INSPECTION.
4. INSPECT, EXAMINE AND AUDIT ALL BOOKS, RECORDS AND DOCUMENTS PERTAINING TO A SLOT MACHINE LICENSEE'S OPERATION.
5. SEIZE, IMPOUND OR ASSUME PHYSICAL CONTROL OF ANY BOOK, RECORD, LEDGER, GAME, DEVICE, CASH BOX AND ITS CONTENTS, COUNTING ROOM OR ITS EQUIPMENT OR SLOT MACHINE OPERATIONS.

IN ADDITION, TO FURTHER EFFECTUATE THE PURPOSES OF THE GAMING ACT AND ITS REGULATIONS, THE BIE AND THE PSP MAY OBTAIN ADMINISTRATIVE WARRANTS FOR THE INSPECTION AND SEIZURE OF PROPERTY POSSESSED, CONTROLLED, BAILED OR OTHERWISE HELD BY AN LICENSEE, LICENSEE, REGISTRANT, CERTIFICANT, PERMITTEE, INTERMEDIARY, SUBSIDIARY, AFFILIATE OR HOLDING COMPANY.

ANY LICENSEE, PRINCIPAL, KEY EMPLOYEE OR GAMING EMPLOYEE SHALL HAVE THE DUTY TO:

1. PROVIDE ANY ASSISTANCE OR INFORMATION REQUIRED BY THE PENNSYLVANIA GAMING CONTROL BOARD ("BOARD"), OR THE PSP AND TO COOPERATE IN ANY INQUIRY, INVESTIGATION OR HEARING;
2. CONSENT TO INSPECTION, SEARCHES, AND SEIZURES;
3. INFORM THE BOARD OF ANY ACTIONS WHICH THEY BELIEVE WOULD CONSTITUTE A VIOLATION OF THIS PART; AND
4. INFORM THE BOARD OF ANY ARRESTS FOR ANY CRIMINAL VIOLATIONS OR OFFENSES INCLUDING THOSE ENUMERATED UNDER 18 PA. C.S.A. (RELATING TO CRIMES AND OFFENSES).

FURTHERMORE, BY SIGNING BELOW, THE CEO/LICENSEE CERTIFIES THAT THE LICENSEE HAS DEVELOPED AND IMPLEMENTED INTERNAL SAFEGUARDS AND POLICIES INTENDED TO PREVENT A VIOLATION OF §1513(b) (RELATING TO POLITICAL INFLUENCE) OF THE ACT AND THAT THE LICENSEE HAS CONDUCTED A GOOD FAITH INVESTIGATION THAT HAS NOT REVEALED ANY VIOLATION OF THIS PROVISION DURING THE PAST YEAR. FURTHERMORE, THE LICENSEE HEREBY CERTIFIES THAT THE UNDERSIGNED IS AUTHORIZED TO SIGN THIS APPLICATION ON BEHALF OF THE LICENSEE AND THAT THERE IS NO MISREPRESENTATION, FALSIFICATION OR OMISSION IN THIS APPLICATION AND FURTHER AGREES TO THE TERMS OF LICENSING AS SPECIFIED WITHIN THE REGULATIONS AND SPECIFICATIONS OF THE PENNSYLVANIA GAMING CONTROL BOARD.

I HEREBY EXPRESSLY WAIVE, RELEASE, AND FOREVER DISCHARGE THE BOARD, THE DOR, THE PSP, THE COMMONWEALTH OF PENNSYLVANIA, AND ITS INSTRUMENTALITIES, AND THEIR AGENTS, EMPLOYEES AND REPRESENTATIVES FROM ANY AND ALL MANNER OF ACTION AND CAUSES OF ACTION WHATSOEVER WHICH I, MY ADMINISTRATORS OR EXECUTORS CAN, SHALL, OR MAY HAVE AGAINST THE COMMONWEALTH OF PENNSYLVANIA, THE LICENSING AGENCY AND THEIR AGENTS, AS A RESULT OF MY APPLYING FOR A GAMING LICENSE IN THE COMMONWEALTH OF PENNSYLVANIA.

<p>LICENSEE CERTIFICATION (REQUIRED) DATE: ____/____/20____</p> <p>_____</p> <p>PRINTED NAME OF LICENSEE</p> <p>_____</p> <p>PRINTED NAME OF CEO/AUTHORIZED SIGNATORY -TITLE</p> <p>_____</p> <p>SIGNATURE OF CEO/AUTHORIZED SIGNATORY*</p> <p>_____</p> <p>INDIVIDUAL PREPARING THIS FORM IF DIFFERENT FROM CEO/AUTH. SIGNATORY</p> <p>_____</p> <p>(NAME, TITLE AND SIGNATURE)</p>	<p>SUBSCRIBED AND SWORN TO ME THIS ____ DAY OF</p> <p>_____ OF 20____.</p> <p>_____</p> <p>NOTARY PUBLIC</p> <p>_____</p> <p>MY COMMISSION EXPIRES ON ____/____/20____</p>
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*IF A PERSON OTHER THAN THE CEO OF THIS ENTITY IS DESIGNATED TO EXECUTE THIS DOCUMENT, THE PGCB MUST BE PROVIDED WITH A RESOLUTION OR AN AFFIDAVIT, CERTIFIED AS TRUE AND CORRECT, IDENTIFYING THE INDIVIDUAL SO DESIGNATED, AUTHORIZING THAT INDIVIDUAL TO EXECUTE THE DOCUMENT ON BEHALF OF BOTH THE ENTITY AND THE CEO.

RELEASE AUTHORIZATION

TO: _____

(DO NOT WRITE ABOVE THIS LINE – FOR GAMING CONTROL BOARD USE ONLY)

FROM: _____

APPLICANT'S NAME (PLEASE PRINT)

(TO BE COMPLETED BY APPLICANTS FOR, AND RELATING TO, INITIAL AND RENEWAL LICENSE APPLICATIONS FOR OPERATOR & MANAGEMENT COMPANIES, MANUFACTURERS/DESIGNEES, SUPPLIERS, PRINCIPAL ENTITIES)

I, _____, BY AND ON BEHALF OF THE UNDERSIGNED APPLICANT/ LICENSEE HAVE FILED WITH THE PENNSYLVANIA GAMING CONTROL BOARD AN "APPLICATION" AS THAT TERM IS DEFINED IN 58 PA. CODE §401A.3. I CERTIFY THAT I AM AUTHORIZED BY THE APPLICANT TO SUBMIT THIS RELEASE AUTHORIZATION ON ITS BEHALF AND TO BIND THE APPLICANT TO ALL PROVISIONS WITHIN THIS RELEASE AUTHORIZATION. I/WE UNDERSTAND THAT THE APPLICANT IS SEEKING THE GRANTING OF A PRIVILEGE AND ACKNOWLEDGE THAT THE BURDEN OF PROVING APPLICANT'S QUALIFICATIONS AND SUITABILITY FOR A FAVORABLE DETERMINATION IS AT ALL TIMES THE BURDEN OF THE APPLICANT.

I/WE UNDERSTAND THAT A BACKGROUND INVESTIGATION WILL BE CONDUCTED BY AGENTS OF THE PGCB'S BUREAU OF INVESTIGATIONS AND ENFORCEMENT PURSUANT TO THEIR STATUTORY DUTY TO INVESTIGATE THE CHARACTER, HONESTY, INTEGRITY AND SUITABILITY OF MYSELF AND ANY ENTITY WITH WHICH I AM ASSOCIATED CONSISTENT WITH 4 PA.C.S. CHAPTERS 13 AND 15. I FURTHER UNDERSTAND AND AGREE THAT I AM VOLUNTARILY EXECUTING THIS RELEASE AUTHORIZATION TO EXPRESSLY AUTHORIZE AND PERMIT AGENTS OF THE BOARD TO OBTAIN ANY AND ALL INFORMATION THEY DEEM NECESSARY TO PERFORM THIS DUTY, AND ACCEPT ANY RISK OF ADVERSE PUBLIC NOTICE, EMBARRASSMENT, CRITICISM, OR OTHER ACTION OR FINANCIAL LOSS WHICH MAY RESULT FROM ACTION WITH RESPECT TO THIS APPLICATION.

THE RIGHTS AND POWERS HEREIN GRANTED ARE INTENDED TO FACILITATE THE BACKGROUND INVESTIGATION BEING CONDUCTED BY THE PENNSYLVANIA GAMING CONTROL BOARD AT MY REQUEST AND ON BEHALF OF THE APPLICANT AND IS NOT OTHERWISE INTENDED TO CREATE OR ESTABLISH A LEGAL OR FIDUCIARY RELATIONSHIP BETWEEN THE PENNSYLVANIA GAMING CONTROL BOARD, ITS AGENTS OR EMPLOYEES AND ME. I HEREBY ACKNOWLEDGE THAT NO SUCH RELATIONSHIP EXISTS.

1. I HEREBY AUTHORIZE AND REQUEST EVERY PERSON, FIRM, COMPANY, CORPORATION, BOARD, ASSOCIATION OR INSTITUTION OF ANY KIND, AND EVERY FEDERAL, STATE OR LOCAL GOVERNMENTAL AGENCY, INCLUDING, BUT NOT LIMITED TO, EVERY COURT, LAW ENFORCEMENT AGENCY, CRIMINAL JUSTICE AGENCY, OR PROBATION DEPARTMENT, WITHOUT EXCEPTION, BOTH FOREIGN AND DOMESTIC, TO WHOM THIS RELEASE AUTHORIZATION IS PRESENTED HAVING ANY KNOWLEDGE, INFORMATION, DOCUMENTS, FORMS, PHOTOGRAPHS, COMPUTER FILES, ACCOUNTS, LEDGERS OR OTHER ITEMS ABOUT, RELATING TO OR CONCERNING THE APPLICANT AND TO FULLY DISCUSS WITH, AND ANSWER ANY INQUIRY MADE BY ANY DULY AUTHORIZED INVESTIGATOR OF THE PENNSYLVANIA GAMING CONTROL BOARD.

2. IF THIS RELEASE AUTHORIZATION IS PRESENTED TO A BROKERAGE FIRM, BANK, SAVINGS AND LOAN, OR OTHER FINANCIAL INSTITUTION OR AN OFFICER OF SAME, I HEREBY AUTHORIZE AND REQUEST THAT ANY DULY AUTHORIZED INVESTIGATOR OF THE PENNSYLVANIA GAMING CONTROL BOARD BE PERMITTED TO REVIEW AND OBTAIN COPIES OF ANY AND ALL DOCUMENTS, RECORDS, OR CORRESPONDENCE PERTAINING TO THE APPLICANT, INCLUDING BUT NOT LIMITED TO PAST LOAN INFORMATION, NOTES, CHECKING ACCOUNT RECORDS, SAVINGS DEPOSIT RECORDS, SAFE DEPOSIT BOX RECORDS, PASSBOOK RECORDS, AND GENERAL LEDGER FOLIO SHEETS.

3. I HEREBY AUTHORIZE AN AGENT OF THE PENNSYLVANIA GAMING CONTROL BOARD TO REVIEW AND OBTAIN COPIES OF ANY AND ALL DOCUMENTS, RECORDS, OR CORRESPONDENCE PERTAINING TO MYSELF AND THE APPLICANT, AND I HEREBY AUTHORIZE ANY FEDERAL, STATE, LOCAL OR MUNICIPAL AGENCY OR BODY, LAW ENFORCEMENT AGENCY OR CRIMINAL JUSTICE AGENCY OR DEPARTMENT, TAX AGENCY OR AUTHORITY, REGULATORY AUTHORITY, AGENCY OR BODY, TO MAKE FULL AND COMPLETE DISCLOSURE OF ANY AND ALL INFORMATION AND DOCUMENTS INCLUDING, BUT NOT LIMITED TO, DOCUMENTS AND INFORMATION OTHERWISE PRIVILEGED OR NOT SUBJECT TO PUBLIC DISCLOSURE, AS WELL AS SUCH OTHER INFORMATION ON FILE OR AVAILABLE CONCERNING THE APPLICANT.
4. THIS RELEASE AUTHORIZATION EXTENDS TO THE REVIEW AND COPY OF ANY INFORMATION PROTECTED BY LAW OR CONTRACT FROM DISCLOSURE, PRIVILEGE OR OBLIGATION.
5. THIS RELEASE AND AUTHORIZATION SHALL REMAIN IN EFFECT UNTIL SUCH TIME AS THE APPLICANT CEASES TO BE AN APPLICANT OR A LICENSEE/PERMITTEE/REGISTRANT/CERTIFICATE HOLDER UNDER THE PENNSYLVANIA RACE HORSE INDUSTRY DEVELOPMENT AND GAMING ACT.
6. I DO FOR THE APPLICANT AS WELL AS FOR MYSELF, MY HEIRS, EXECUTORS, ADMINISTRATORS, SUCCESSORS AND ASSIGNS, HEREBY RELEASE, REMISE, EXONERATE, AND FOREVER DISCHARGE THE PENNSYLVANIA GAMING CONTROL BOARD, ITS MEMBERS, AGENTS AND EMPLOYEES, THE PENNSYLVANIA STATE POLICE, THE COMMONWEALTH OF PENNSYLVANIA AND ITS INSTRUMENTALITIES, AND ANY AGENTS AND EMPLOYEES THEREOF, FROM ANY AND ALL LIABILITIES, INCLUDING BUT NOT LIMITED TO ALL MANNER OF ACTIONS, CAUSES OF ACTION, SUITS, DEBTS, JUDGMENTS, EXECUTIONS, CLAIMS, AND DEMANDS WHATSOEVER, KNOWN OR UNKNOWN, IN LAW OR EQUITY, WHICH EXIST NOW OR IN THE FUTURE AGAINST THOSE ENTITIES AND PERSONS OTHER THAN RELATING TO A WILLFULLY UNLAWFUL DISCLOSURE OR PUBLICATION OF MATERIAL OR INFORMATION ACQUIRED DURING MY INVESTIGATION.
7. I DO FOR THE APPLICANT AS WELL AS FOR MYSELF, MY HEIRS, EXECUTORS, ADMINISTRATORS, SUCCESSORS AND ASSIGNS, HEREBY RELEASE, REMISE, EXONERATE, AND FOREVER DISCHARGE EVERY PERSON, FIRM, COMPANY, CORPORATION, BOARD, ASSOCIATION OR INSTITUTION OF ANY KIND, AND EVERY FEDERAL, STATE OR LOCAL GOVERNMENTAL AGENCY, INCLUDING, BUT NOT LIMITED TO, EVERY COURT, LAW ENFORCEMENT AGENCY, CRIMINAL JUSTICE AGENCY, OR PROBATION DEPARTMENT, WITHOUT EXCEPTION, BOTH FOREIGN AND DOMESTIC, TO WHOM THIS REQUEST IS PRESENTED, AND ANY AGENTS AND EMPLOYEES THEREOF, FROM ANY AND ALL LIABILITIES, INCLUDING BUT NOT LIMITED TO ALL MANNER OF ACTIONS, CAUSES OF ACTION, SUITS, DEBTS, JUDGMENTS, EXECUTIONS, CLAIMS, AND DEMANDS WHATSOEVER, KNOWN OR UNKNOWN, IN LAW OR EQUITY, WHICH EXIST NOW OR IN THE FUTURE AGAINST THOSE ENTITIES AND PERSONS TO WHOM THIS REQUEST IS PRESENTED, AND ANY AGENTS OR EMPLOYEES THEREOF, ARISING OUT OF OR BY REASON OF, THE FURNISHING OF OR INSPECTION OF DOCUMENTS, RECORDS, AND OTHER INFORMATION RELEASED IN COMPLIANCE WITH A REQUEST MADE PURSUANT TO, OR AS A RESULT OF HAVING BEEN PRESENTED WITH, THIS RELEASE AUTHORIZATION.
8. THE APPLICANT AGREES TO INDEMNIFY AND HOLD HARMLESS THE PENNSYLVANIA GAMING CONTROL BOARD, ITS OFFICIALS AND EMPLOYEES AND EVERY PERSON, FIRM, COMPANY, CORPORATION, BOARD, ASSOCIATION OR INSTITUTION OF ANY KIND, AND EVERY FEDERAL, STATE OR LOCAL GOVERNMENTAL AGENCY, TO WHOM THIS REQUEST IS PRESENTED AND FROM AND AGAINST ALL CLAIMS, DAMAGES, LOSSES, AND EXPENSES INCLUDING REASONABLE ATTORNEYS' FEES ARISING OUT OF OR BY REASON OF, THE ACTS PERMITTED AND PROVIDED FOR IN THE RELEASE AUTHORIZATION.
9. I AGREE THAT A REPRODUCTION OF THIS REQUEST BY PHOTOCOPY, FACSIMILE OR SIMILAR PROCESS SHALL BE FOR ALL INTENTS AND PURPOSES AS VALID AS THE ORIGINAL.

APPLICANT HAS READ THIS RELEASE AUTHORIZATION AND UNDERSTANDS ALL ITS TERMS. APPLICANT EXECUTES THIS DOCUMENT VOLUNTARILY AND WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE.

IN WITNESS WHEREOF, I HAVE EXECUTED THIS RELEASE AUTHORIZATION AT _____, _____
CITY STATE

ON THIS, THE _____ DAY OF _____, 20_____. _____
SIGNATURE OF CEO/AUTHORIZED SIGNATORY*

ON THIS, THE _____ DAY OF _____, 20_____, BEFORE ME, THE SUBSCRIBER, A NOTARY PUBLIC, IN AND FOR

_____, _____, PERSONALLY APPEARED
COUNTY STATE

_____, (KNOWN BY ME OR SATISFACTORILY PROVEN) TO BE THE PERSON WHOSE NAME IS
SUBSCRIBED TO THIS RELEASE AUTHORIZATION, AND ACKNOWLEDGED THAT THEY EXECUTED THE SAME FOR THE PURPOSE
HEREIN CONTAINED.

IN WITNESS WHEREOF, I HEREUNTO SET MY HAND AND OFFICIAL SEAL.

NOTARY PUBLIC

*IF A PERSON OTHER THAN THE CEO OF THIS ENTITY IS DESIGNATED TO EXECUTE THIS DOCUMENT, THE BOARD
MUST BE PROVIDED WITH A RESOLUTION OR AN AFFIDAVIT, CERTIFIED AS TRUE AND CORRECT, IDENTIFYING THE
INDIVIDUAL SO DESIGNATED AND AUTHORIZING THAT INDIVIDUAL TO EXECUTE THE DOCUMENT ON BEHALF OF BOTH
THE ENTITY AND THE CEO.

SIGNATURE OF PENNSYLVANIA GAMING CONTROL BOARD AGENT PRESENTING THIS REQUEST:

_____ DATE: _____

WAIVER OF LIABILITY

ON BEHALF OF _____, (NAME OF LICENSEE) I, _____
(NAME OF CHIEF EXECUTIVE OFFICER/AUTHORIZED SIGNATORY), HEREBY WAIVE LIABILITY AS TO THE
COMMONWEALTH OF PENNSYLVANIA AND ITS INSTRUMENTALITIES AND AGENTS, FOR ANY DAMAGES RESULTING
TO THE SAID LICENSEE FROM ANY DISCLOSURE OR PUBLICATION IN ANY MANNER, OTHER THAN A WILLFULLY
UNLAWFUL DISCLOSURE OR PUBLICATION, OF ANY MATERIAL OR INFORMATION ACQUIRED DURING THE LICENSING
PROCESS OR DURING ANY INQUIRIES, INVESTIGATIONS OR HEARINGS RELATED THERETO.

I AM AWARE THAT FALSE OR MISLEADING STATEMENTS OR OMITTED INFORMATION WILL BE CAUSE FOR
REJECTION OR REVOCATION OF THE LICENSE, REGISTRATION, CERTIFICATE OR PERMIT AND MAY BE SUBJECT TO
CRIMINAL PENALTIES UNDER 18 PA C.S.A. §§4902, 4903 AND 4904.

PRINTED LICENSEE NAME

DATE

SIGNATURE OF CEO/AUTHORIZED SIGNATORY*

PRINTED NAME OF CEO/ AUTHORIZED SIGNATORY - TITLE

DAYTIME TELEPHONE NUMBER

SWORN AND SUBSCRIBED TO ME THIS _____

DAY OF _____, 20_____.

NOTARY PUBLIC

MY COMMISSION EXPIRES ON: _____/_____/20_____

*IF A PERSON OTHER THAN THE CEO OF THIS ENTITY IS DESIGNATED TO EXECUTE THIS DOCUMENT, THE BOARD MUST BE PROVIDED WITH A
RESOLUTION OR AN AFFIDAVIT, CERTIFIED AS TRUE AND CORRECT, IDENTIFYING THE INDIVIDUAL SO DESIGNATED, AUTHORIZING THAT
INDIVIDUAL TO EXECUTE THE DOCUMENT ON BEHALF OF BOTH THE ENTITY AND THE CEO.

DIVERSITY PLAN STATEMENT

SLOT MACHINE LICENSE LICENSEE NAME _____

SLOT MACHINE LICENSE LICENSEE MAILING ADDRESS

SLOT MACHINE LICENSEE PHONE NUMBER _____

EQUAL OPPORTUNITY OFFICER _____

DATE SUBMITTED ____/____/____

PURSUANT TO §1325(B)(1) OF THE PENNSYLVANIA RACE HORSE DEVELOPMENT AND GAMING ACT:

LICENSEE HAS DEVELOPED AND IMPLEMENTED A DIVERSITY PLAN.

PLEASE CHECK ONE:

- THE BOARD RECEIVED THE MOST RECENT DIVERSITY PLAN ON _____.
- ATTACHED IS THE MOST RECENT DIVERSITY PLAN.

SIGNATURE OF CEO/ AUTHORIZED SIGNATORY*

PRINTED NAME OF CEO/AUTHORIZED SIGNATORY-TITLE

_____/_____/_____
DATE

*IF A PERSON OTHER THAN THE CEO OF THIS ENTITY IS DESIGNATED TO EXECUTE THIS DOCUMENT, THE BOARD MUST BE PROVIDED WITH A RESOLUTION OR AN AFFIDAVIT, CERTIFIED AS TRUE AND CORRECT, IDENTIFYING THE INDIVIDUAL SO DESIGNATED, AUTHORIZING THAT INDIVIDUAL TO EXECUTE THE DOCUMENT ON BEHALF OF BOTH THE ENTITY AND THE CEO.

LICENSEE'S AFFIRMATION

PURSUANT TO 4 PA. C.S. § 1317 AND 1317.1, LICENSEE AFFIRMS THAT NEITHER IT NOR ANY OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES OR HOLDING COMPANIES IS A MANUFACTURER LICENSEE OR SUPPLIER LICENSEE.

LICENSEE FURTHER AFFIRMS THAT IT IS IN COMPLIANCE WITH THE INDUSTRY LETTER ON VENDOR LICENSING POLICY ISSUED BY THE BOARD ON JUNE 2, 2005, AND HAS CONDUCTED DUE DILIGENCE REVIEWS OF ALL GAMING SERVICE PROVIDERS, CONTRACTORS, AND SUBCONTRACTORS, INCLUDING THOSE THE LICENSEE HAS CONTRACTED WITH FOR CONSTRUCTION SERVICES. THIS REVIEW INCLUDED AN EVALUATION OF THE VENDOR'S FINANCES AND CHARACTER.

THE LICENSEE UNDERSTANDS THAT THE BOARD'S REVIEW OF ANY CONTRACTS MAY RESULT IN THE CONTRACTOR BEING REQUIRED TO APPLY TO THE BOARD FOR CERTIFICATION OR REGISTRATION AS A GAMING SERVICE PROVIDER AND THAT THE DECISION TO REQUIRE CERTIFICATION OR REGISTRATION MAY BE SUBJECT TO CERTAIN DOLLAR THRESHOLDS.

DATE: ____/____/20____

SUBSCRIBED AND SWORN TO ME THIS

____ DAY OF _____ OF, 20____.

NAME OF LICENSEE

NOTARY PUBLIC

SIGNATURE OF CEO/AUTHORIZED SIGNATORY*

MY COMMISSION EXPIRES ON
____/____/20____

PRINTED NAME OF CEO/AUTHORIZED SIGNATORY-TITLE

*IF A PERSON OTHER THAN THE CEO OF THIS ENTITY IS DESIGNATED TO EXECUTE THIS DOCUMENT, THE BOARD MUST BE PROVIDED WITH A RESOLUTION OR AN AFFIDAVIT, CERTIFIED AS TRUE AND CORRECT, IDENTIFYING THE INDIVIDUAL SO DESIGNATED, AUTHORIZING THAT INDIVIDUAL TO EXECUTE THE DOCUMENT ON BEHALF OF BOTH THE ENTITY AND THE CEO.

COMMONWEALTH OF PENNSYLVANIA

ANNUAL CERTIFICATION BY A LICENSEE OR LICENSED ENTITY OF SAFEGUARDS AND POLICIES PREVENTING VIOLATIONS OF SECTION 1513

INSTRUCTIONS: THIS AFFIDAVIT IS TO BE COMPLETED UNDER OATH BY THE CHIEF EXECUTIVE OFFICER OR OTHER APPROPRIATE INDIVIDUAL OF THE LICENSEE OR LICENSED ENTITY PURSUANT TO 4 PA.C.S. § 1513(B). ATTACH A COPY OF THE PLAN THAT HAS BEEN DEVELOPED PURSUANT TO 4 PA.C.S. § 1513(B) WHICH SETS FORTH THE INTERNAL SAFEGUARDS AND POLICIES. AN AFFIDAVIT MUST BE COMPLETED ANNUALLY AND PROVIDED TO BOTH THE PGCB AND THE DEPARTMENT OF STATE, BUREAU OF COMMISSIONS, ELECTIONS AND LEGISLATION.

AFFIDAVIT

STATE OF _____)
) SS:
COUNTY OF _____)

BEFORE ME, THE UNDERSIGNED NOTARY PUBLIC, THIS DAY, PERSONALLY APPEARED _____, CHIEF OPERATING OFFICER OR OTHER APPROPRIATE REPRESENTATIVE OF _____, AN LICENSEE OR A LICENSED ENTITY, TO ME KNOWN OR PROVEN, WHO BEING DULY SWORN ACCORDING TO LAW, DEPOSES THE FOLLOWING:

[] I HEREBY CERTIFY THAT _____ (NAME OF LICENSEE OR LICENSEE) HAS DEVELOPED AND IMPLEMENTED INTERNAL SAFEGUARDS AND POLICIES INTENDED TO PREVENT A VIOLATION OF 4 PA.C.S. § 1513 (RELATING TO POLITICAL INFLUENCE) AND THAT THE LICENSEE OR LICENSED ENTITY HAS CONDUCTED A GOOD FAITH INVESTIGATION, INCLUDING BUT NOT LIMITED TO AN INVESTIGATION OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES, HOLDING COMPANIES, PRINCIPALS AND KEY EMPLOYEES WHO HOLD SIMILAR GAMING LICENSES IN OTHER JURISDICTIONS THAT, HAS NOT REVEALED ANY VIOLATION OF THIS PROVISION DURING THE PERIOD COVERING _____ TO _____.

OR

[] I HEREBY CERTIFY THAT THE LICENSEE OR LICENSED ENTITY NAMED ABOVE _____ (NAME OF LICENSEE OR LICENSEE) HAS DEVELOPED AND IMPLEMENTED INTERNAL SAFEGUARDS AND POLICIES INTENDED TO PREVENT A VIOLATION OF 4 PA.C.S. § 1513 (RELATING TO POLITICAL INFLUENCE) AND THAT THE LICENSEE OR LICENSED ENTITY HAS CONDUCTED A GOOD FAITH INVESTIGATION, INCLUDING BUT NOT LIMITED TO AN INVESTIGATION OF ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES, HOLDING COMPANIES, PRINCIPALS AND KEY EMPLOYEES WHO HOLD SIMILAR GAMING LICENSES IN OTHER JURISDICTIONS, THAT HAS REVEALED VIOLATION(S) OF THIS PROVISION DURING THE PERIOD COVERING _____ TO _____ AS SET FORTH ON THE POLITICAL CONTRIBUTIONS ATTACHMENT.

I HEREBY CERTIFY THAT I AM AUTHORIZED TO EXECUTE THIS CERTIFICATION ON BEHALF OF THE ENTITY NAMED ABOVE AND THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT AND THAT THERE IS NO MISREPRESENTATION, FALSIFICATION OR OMISSIONS IN THIS AFFIDAVIT. I AM FURTHER AWARE THAT ANY FALSE OR MISLEADING STATEMENT OR OMITTED INFORMATION WILL BE CAUSE FOR PENALTIES UNDER 4 PA.C.S. § 1513(C) AND MAY BE SUBJECT TO CRIMINAL PENALTIES UNDER 18 PA.C.S. § 4902, 4903 AND 4904.

SIGNATURE OF AFFIANT AND TITLE

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____, 20_____.

NOTARY PUBLIC

NOTARY SEAL:

PENNSYLVANIA POLITICAL CONTRIBUTIONS FORM

IN THE CHART BELOW, PROVIDE THE REQUIRED INFORMATION FOR ALL POLITICAL CONTRIBUTIONS, MONETARY OR IN-KIND, TO A CANDIDATE FOR NOMINATION OR ELECTION TO ANY PUBLIC OFFICE IN THIS COMMONWEALTH, OR TO ANY POLITICAL COMMITTEE OR STATE PARTY IN THIS COMMONWEALTH OR TO ANY GROUP, COMMITTEE OR ASSOCIATION ORGANIZED IN SUPPORT OF ANY SUCH CANDIDATE, POLITICAL COMMITTEE OR STATE PARTY ON OR AFTER THE DATE YOUR ENTITY'S APPLICATION WAS SUBMITTED TO THE PENNSYLVANIA GAMING CONTROL BOARD (BOARD). THE LICENSEE OR LICENSEE MUST LIST POLITICAL CONTRIBUTIONS BY ITS AFFILIATES, INTERMEDIARIES, SUBSIDIARIES, HOLDING COMPANIES, PRINCIPALS AND KEY EMPLOYEES WHO HOLD SIMILAR GAMING LICENSES IN OTHER JURISDICTIONS. DO NOT INCLUDE CONTRIBUTIONS TO CANDIDATES FOR FEDERAL OFFICES OR TO COMMITTEES OR GROUPS ORGANIZED SOLELY IN SUPPORT OF FEDERAL CANDIDATES.

IF THERE IS MORE THAN ONE CONTRIBUTION TO THE SAME CANDIDATE, POLITICAL COMMITTEE, STATE PARTY, ETC., SEPARATE ENTRIES MUST BE LISTED FOR EACH CONTRIBUTION.

NOTE: IF YOU NEED SPACE FOR ADDITIONAL ENTRIES, PLEASE MAKE ADDITIONAL COPIES OF THIS FORM.

DATE OF CONTRIBUTION	NAME AND ADDRESS OF THE CANDIDATE, POLITICAL COMMITTEE OR STATE PARTY, OR GROUP, COMMITTEE OR ASSOCIATION ORGANIZED IN SUPPORT OF SUCH CANDIDATE, POLITICAL COMMITTEE OR STATE PARTY	AMOUNT OR VALUE OF CONTRIBUTION

SIGNATURE OF CEO/AUTHORIZED SIGNATORY

DATE SIGNED

PRINTED NAME OF CEO/AUTHORIZED SIGNATORY – TITLE

*IF A PERSON OTHER THAN THE CEO OF THIS ENTITY IS DESIGNATED TO EXECUTE THIS DOCUMENT, THE BOARD MUST BE PROVIDED WITH A RESOLUTION OR AN AFFIDAVIT, CERTIFIED AS TRUE AND CORRECT, IDENTIFYING THE INDIVIDUAL SO DESIGNATED, AUTHORIZING THAT INDIVIDUAL TO EXECUTE THE DOCUMENT ON BEHALF OF BOTH THE ENTITY AND THE CEO.

FINANCIAL STATEMENT CERTIFICATION

FOR THE PERIOD ENDED: _____

NAME OF SLOT MACHINE LICENSEE

I HAVE REVIEWED AND EXAMINED THE ATTACHED FINANCIAL STATEMENT.

TO THE BEST OF MY KNOWLEDGE, THE FINANCIAL STATEMENTS, AND OTHER INFORMATION INCLUDED IN THIS REPORT, ARE ACCURATE AND FAIRLY PRESENT IN ALL MATERIAL RESPECTS, THE FINANCIAL CONDITION, RESULTS OF OPERATIONS AND CASH FLOWS OF THE LICENSEE AS OF, AND FOR, THE PERIODS PRESENTED IN THIS REPORT.

DATE

SIGNATURE OF CHIEF FINANCIAL OFFICER

PRINTED NAME OF CHIEF FINANCIAL OFFICER

DATE

SIGNATURE OF CHIEF OPERATING OFFICER

PRINTED NAME OF CHIEF OPERATING OFFICER