ILLINOIS GAMING BOARD

160 North LaSalle Street, Suite 300 Chicago, Illinois 60601 312-814-4700



INDIVIDUAL KEY PERSON PERSONAL DISCLOSURE FORM

Applicant Name:
Date (mm/dd/yyyy):
Name of affiliated Applicant or Licensee for which this form is submitted:
Indicate below, the type of License of affiliated Applicant or Licensee for which this Form is submitted (check althat apply):
☐ Owners License ☐ Organization Gaming License ☐ Masters Sports Wagering License
☐ Management Services Provider License ☐ Tier 2 Official League Data Provider License ☐ Supplier License
POSITION/RELATIONSHIP WITH APPLICANT/LICENSEE (check all that apply):
☐ Owner ☐ Shareholder ☐ Partner ☐ Manager ☐ Officer ☐ Director/Board Member
☐ Shareholder of parent or subsidiary corporation
Other

INSTRUCTIONS FOR INDIVIDUAL KEY PERSON PERSONAL DISCLOSURE FORM

WARNING

BY FILING THIS FORM, APPLICANT ACCEPTS ANY RISK OF ADVERSE PUBLIC NOTICE, EMBARRASSMENT, CRITICISM, OR OTHER ACTION, OR FINANCIAL LOSS WHICH MAY RESULT FROM ACTION TAKEN OR NOT TAKEN WITH RESPECT TO THE FORM AND EXPRESSLY WAIVES ANY CLAIM FOR DAMAGES AS A RESULT THEREOF. INFORMATION NOT REQUESTED IN THIS FORM OR IN ADDITION TO THAT PROVIDED IN RESPONSE TO THIS FORM MAY BE REQUESTED.

The total cost of the investigation conducted pursuant to this Form shall be borne by the Applicant through whom the Form will be submitted.

This Individual Key Person Personal Disclosure Form is an official document Applicant should respond to the questions contained herein to the Best of his/her Knowledge. Do not misstate or omit any material fact(s) as each statement made herein is subject to verification. ANY misrepresentation, failure to reveal information, or omission is grounds for denial of the Application and/or a finding of unsuitability. "A person who knowingly makes a false statement on an Application is guilty of a Class A Misdemeanor." 230 ILCS 10/1 et seq.

Applicant is under a continuing duty to disclose promptly any changes in the information provided in the Form and additional information and materials submitted to the Board. The duty to make such additional disclosures shall continue throughout any application period, period of licensure, or finding of suitability granted by the Board.

All signatures should be in ink. Answer all questions, if a question does not apply to you, answer "N/A". If space available is insufficient, submit as a separate exhibit, and precede each answer with the appropriate reference to the question. Applicant must initial each page, as provided in the lower right hand corner. By placing his/her initials on each page, the Applicant is attesting to the accuracy and completeness of the information contained on that page.

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A. FORMS AND DOCUMENTS

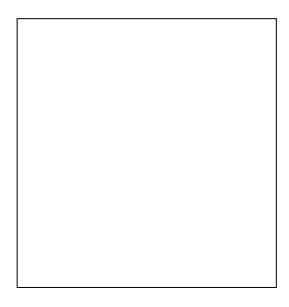
An electronic copy of this Form, with the items listed below, must be submitted by the Applicant. The electronic copy should be labeled with the Individual Applicant's name, along with the Licensee for which this form is submitted.

- 1. Individual Key Person Personal Disclosure Form. This Form must be submitted for each Individual Key Person. The Board may require Applicant to submit this Form for other Individuals.
- 2. Schedule of Exhibits.
- 3. Applicant's Request to Release Information.
- 4. Release of All Claims.
- 5. Affidavit of Full Disclosure.
- 6. Verification.
- 7. IRS Account Transcript (for the last five years).
- 8. Complete copies of Federal and State tax returns for the last three (3) years.
- 9. A current (within the last 6 months) photograph of you.
- 10. Birth Certificate.
- 11. 5.1 Disclosure of Records.

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Name_		
Date_		

*Attach a recent photo color passport quality photograph of you.



*Attach a copy of your birth certificate.

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IMPORTANT NOTICES

Individuals submitting this Form are required to be fingerprinted under the Illinois Gambling Act, and/or Sports Wagering Act. You will be informed as to where you will be fingerprinted when you file this Form. This Form will not be considered complete until fingerprints are provided.

You may be required to provide additional information or submit additional forms.

You must immediately notify the Illinois Gaming Board of any changes in the information submitted in this Form and related materials.

All materials submitted to the Illinois Gaming Board must be sent to:

Illinois Gaming Board Attention: Licensing Unit 160 N. LaSalle Street, Suite 300 Chicago, Illinois 60601-3103

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B. DEFINITIONS

For the purposes of this Application, the following terms shall have the following meanings:

Act: Illinois Gambling Act, and Sports Wagering Act.

Affiliate: An affiliate of an entity is a person that directly, or indirectly through one or more intermediaries, controls, or is controlled by, or is under common control with, such entity.

Applicant: Any Individual or Business Entity, including any predecessor business entity, who directly or indirectly has submitted a Business Entity Disclosure Form, Individual Key Person Personal Disclosure Form, Occupational License Level 1 Application or Trust Registration And Disclosure Form.

Application: All material submitted, including the Instructions, Definitions, Forms and other documents issued by the Board, comprising Applicant's Individual Key Person Personal Disclosure Form.

Attributed Interest: A direct or indirect interest in an Applicant deemed to be held by an Individual not through the Individual's actual holdings but either through the holdings of the Individual's relatives or through a third party or parties on behalf of the Individual pursuant to a plan, arrangement or agreement.

Bank: (A) A banking institution organized under the laws of the United States or any other country or jurisdiction, (B) a member bank of the Federal Reserve System, (C) any other banking institution or trust company, whether incorporated or not, doing business under the laws of any State or of the United States, a substantial portion of the business of which consists of receiving deposits or exercising fiduciary powers similar to those permitted to national banks under the authority of the Comptroller of the Currency, and which is supervised and examined by State or Federal authority having supervision over banks, and which is not operated for the purpose of evading the provisions of this title, and (D) a receiver, conservator or other liquidating agent of any institution or firm included in clauses (A), (B) or (C) of this paragraph.

Beneficiary: Person for whose current, contingent or future benefit property is held in trust.

Best of Knowledge: Applicant's knowledge after substantial inquiry.

Board: The Illinois Gaming Board.

Business Entity: A partnership, incorporated or unincorporated association or group, firm, corporation, limited liability company, partnership for shares, trust, sole proprietorship or other business enterprise.

Casino: A facility at which lawful gambling is authorized as provided in the Illinois Gambling Act.

Compensation: Anything of value, including without limitation salary, wages, commissions, tips, gratuities, fees, bonuses, stock options, warrants and distributions from S corporations, in any form, including cash, securities, real property and tangible and intangible personal property.

Contingent Liability: Any obligation, indebtedness or claim, the amount of which cannot be definitely ascertained until the occurrence or nonoccurrence of some future event.

Control: The possession, direct or indirect, of the power to direct or cause the direction of the management, operation or policies of an Individual or Business Entity, whether through the ownership of voting securities, by contract, or otherwise.

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Debt Instrument: Any bond, loan, mortgage, trust deed, note, debenture, subordination, guaranty, letter of credit, security agreement, surety agreement, pledge, chattel mortgage or other form of indebtedness.

Dependent: Any Individual who received over half of his support in a calendar year from any other Individual.

Docksite: The location where a Riverboat Gaming Operation conducts gambling operations pursuant to an Owners License or where a Riverboat moors for the purpose of embarking passengers for and disembarking passengers from a Riverboat Gaming Operation.

Due Diligence: A thorough review of public and private source information that is conducted pursuant to a detailed investigative plan on the identity, background experience, credentials, licensing, financial stability, and other factors related to a Person's ability to perform contractual obligations or otherwise meet the requirements for suitability and licensing in the State of Illinois.

FEIN: Federal Employee Identification Number.

Felony: A criminal offense for which a sentence of imprisonment for one year or more may be imposed under the laws of any jurisdiction.

Financial Statement: Any balance sheet, income statement, profit and loss statement, statement of cash flow, and sources and uses of funds statement.

Game: A gambling activity which is played for money, property, or anything of value, including without limitation those played with cards, Chips, Tokens, Vouchers, dice, implements, or electronic, electrical, or mechanical devices or machines.

Gambling Operation: Means the conduct of gambling games authorized under the Illinois Gambling Act upon a riverboat or in a casino or authorized under the Illinois Gambling Act and the Illinois Horse Racing Act of 1975 at an organization gaming facility.

Gaming: The dealing, operating, carrying on, conducting, maintaining or exposing for play of any Game.

Gaming Equipment/Supplies: A machine, mechanism, device or implement which is integral to the operation of a Game or affects the result of a Game by determining win or loss, including without limitation: electronic, electrical, or mechanical devices or machines; cards or dice; layouts for Live Gaming Devices; any representative of value used with any Game, including without limitation chips, tokens, or electronic cards; Voucher Systems; Voucher Printers; Voucher Validation Terminals; Computer Monitoring Systems; and hardware and software related to any item described herein.

Gaming Operations Manager: An Individual or Business Entity other than the holder of an Owners License who has the ultimate responsibility to manage, direct or administer the conducting of Gaming.

Immediate Family: Spouse (other than a spouse who is legally separated from the Individual under a decree of divorce or separate maintenance), parents, grandparents, siblings, children and grandchildren, step-children, whether by blood, marriage, adoption or natural relationship.

Indirect Interest: An interest in a Business Entity that is deemed to be held by an Applicant or holder of an Owners license not through the Applicant's or holder's actual holdings in the Business Entity, but through the Applicant's or holder's holdings in other Business Entities.

Individual: Any natural person.

Internet wagering operation: As the context requires, the conducting of internet wagering and all related activities

Junketeer: An Individual or entity that facilitates a patron's participation in gaming at a Riverboat Gaming Operation and is compensated, not as an employee but as an independent contractor, by that Operation based upon how much the patron actually wagers or loses.

Key Person: An Individual or Business Entity identified by the Board's Adopted Rules.

Management Services Provider License: A license issued to an entity who has contracted with a Master Sports Wagering Licensee to conduct its sports wagering operation in accordance with the provisions of the Sports Wagering Act and the rules of the Illinois Gaming Board.

Master Sports Wagering License: A license issued to an Owners Licensee, Organization Gaming Licensee, Sports Facility or Online Sports Wagering Operator, to conduct sports wagering in accordance with the provisions of the Sports Wagering Act and the rules of the Illinois Gaming Board and Department of Lottery.

Material Litigation: Pending or threatened litigation and resolved lawsuits, administrative actions, unsatisfied judgments, decrees, restraining orders, injunctive orders, excluding personal injury litigation resolved for or seeking less than \$1,000,000.

Nominee: Any Individual or Business Entity that holds as owner of record the legal title to tangible or an intangible personality or real property, including without limitation any stock, bond, debenture, note, investment contract or real estate on behalf of another Individual or Business Entity, and as such is designated and authorized to act on his or its behalf with respect to such property.

Organizational Gaming Facility: means that portion of an Organization Licensee's racetrack facilities at which gaming authorized under Section 7.7 of the Illinois Gambling Act is conducted.

Organization Gaming License: A license issued by the Illinois Gaming Board under Section 7.7 of the Illinois Gambling Act authorizing gaming pursuant to that section at an organization gaming facility.

Organizational Licensee: means an entity authorized by the Illinois Racing Board to conduct pari-mutuel wagering in accordance with the Illinois Horse Racing Act of 1975.

Owners License: A license issued by the Illinois Gaming Board to conduct Riverboat or a Casino Gambling Operation, but does not include an Organization Gaming License.

Ownership Interest: Includes, but is not limited to, direct, Indirect, beneficial or attributed interest, or holder of stock options, warrants or stock appreciation rights, or holder of any beneficial ownership interest in the Applicant for, or holder of, an Owners, Organization Gaming, Master Sports Wagering, Management Services Provider, Tier 2 Official League Data Provider or Supplier's license.

Person: "Person" includes both individuals and Business Entities.

Predecessor Company: A Business Entity which no longer exists in its original form but whose assets in substantial part have been acquired by another Business Entity or which had undergone certain internal changes, such as those of identity, form, or capital structure.

Public Official: An Individual who is elected to, is an officer of or employed by any federal or state office or political subdivision, pursuant to federal or state law, or who is appointed to an office which is established under and the qualifications and duties of which are prescribed by such federal or state law to discharge a public duty.

Publicly Held Company: A company that has filed a registration statement with the Securities and Exchange Commission.

Registered Agent: Any Individual or Business Entity against whom service of process may be made on behalf of any Business Entity or that is designated as such by any articles of incorporation or other corporate filings in any state.

Related Party: An Individual or Business Entity having a pecuniary interest in a Business Entity which is not a Publicly Held Company; a holder of more than 5% of the outstanding shares of a Publicly Held Company; a Key Person of a Business Entity; an Affiliate of a Business Entity; a Relative of an Individual having a pecuniary interest in a Business Entity which is not a Publicly Held Company; a Relative of a holder of more than 5% of the outstanding shares of a corporation which is a Publicly Held Company; a Relative of a Key Person of a Business Entity; a Relative of an Affiliate of a Business Entity; a trust for the benefit of or managed by a Business Entity or a Key Person thereof; or any other Individual or Business Entity who is able to control or significantly influence the management or operating policies of a Business Entity.

Relative: Spouse, parents, grandparents, children, siblings, uncles, aunts, nephews, nieces, first cousins, fathers-in-law, mothers-in-law, sons-in-law, daughters-in-law, brothers-in-law, sisters-in-law, whether by blood, marriage, adoption or natural relationship, and Dependents.

Riverboat: A self-propelled excursion boat or a permanently moored barge on which lawful gambling is authorized and licensed as provided in the Act.

Riverboat Gaming Operation: The applicant for an Owners License, Owners Licensee, Gaming Operations Manager, or, as the context requires, the conducting of Gaming and all related activities, including without limitation the purveying of food, beverages, retail goods and services, and transportation, on a Riverboat and at its Support Facilities.

Sole Proprietor: An Individual who in his or her own name owns 100% of the assets and who is solely liable for the debts of a business.

Sports Wagering: means accepting wagers on Sports Events or portions of sports events, or on the individual performance statistics of athletes in a sports event or combination of sports events, by any system or method of wagering, including, but not limited to, in person or over the Internet through websites and on mobile devices. "Sports wagering" includes, but is not limited to, single-game bets, teaser bets, parlays, over-under, moneyline, pools, exchange wagering, in-game wagering, in-play bets, proposition bets, and straight bets.

Substantial Creditor: The holder of any Debt Instrument of whatever character, against an Individual or Business Entity, whether secured or unsecured, matured or unmatured, liquidated or unliquidated, absolute, fixed or contingent, the aggregate amount of which is \$50,000 or more.

Substantial Owner: The holder of at least 25% of the total combined voting power of a corporation or at least 25% of the total value of shares of all classes of stock of a corporation; or at least a 25% interest in a partnership; or at least 25% of the value of a trust computed actuarially; or at least 25% of the legal or beneficial interest in any other Business Entity. For purposes of computing the foregoing percentages, a holder shall be deemed to own any stock or other interest in a Business Entity, whether owned directly or indirectly.

Supplier: Either a Gaming Operations Manager, lessor of a Casino/Riverboat, Organization Gaming facility, or dock facilities, junketeer, or provider of Gaming Equipment, Gaming Equipment maintenance or repair services, or a provider of any goods or services to a Casino/Riverboat, or Organization Gaming Operation, or a person who sells or leases sports wagering equipment, systems, or other gaming items to conduct sports wagering and offer services related to the equipment or other gaming items and data to a master sports wagering licensee.

Support Facility: A place of business which is part of, or operates in conjunction with, a Riverboat Gaming Operation, or is owned in whole or in part by a holder of an Owners or Supplier's license or any of their Key Persons, including without limitation Riverboats, offices, docking facilities, parking facilities, and land-based hotels or restaurants.

Tier 2 Official League Data Provider License: A license issued to a Sports Governing Body or sports league, organization or association or vendor authorized by such Sports Governing Body or sports league, organization or association to distribute or provide Tier 2 official league data to a Master Sports Wagering Licensee for Tier 2 sports wagers.

Trustee: Person who holds legal title to property in a trust for the benefit of the beneficiaries of the trust.

Video Gaming Operation: As the context requires, the conducting of video gaming and all related activities

1. PERSONAL INFORMATION:

T , NT	/T 1 1 C	T			E' A					N 6' 1 11	N T	
Last Name: (Include Sr., Jr., etc.)					First Name:				Middle	Middle Name:		
Maiden Nan	Alia	as Name	es: (Ni	ickna	mes, Oth	er Name Cha	anges, le	egal or otherwise)				
Danislanaa A	44					C:4	/C+++	/7: C- 1			0	
Residence A	adress:					City/	State	/Zip Cod	e:		Occupied Since:	
Mailing Add	dress: (If diffe	rent than ah	ove)				City/	State/Zip	Code:			
Walling Add	iicss. (ii diiic	Tent than ao	010)				City/i	State/Zip	Couc.			
Telephone	Residence:		Busine	ess:					Mobile:			
Employer N	ame:		E	Emp	loyer A	ddress	s:			City/S	tate/Zip Code:	
1 ,												
Occupation:				Е	mail Ac	dress	:					
Date of Birt	h:	Age:	Place	e of	Birth:			Social S	Security Nun	rity Number:		
Sex:	Color of Eye	es: Color	of Hair:		Comple	xion:	Не	eight:	Weight:	Buil	d:	
Scars, Tatto	os, or Disting	uishing Mar	ks and/o	or C	haracte	ristics:	:					
,	<u></u>											
2. Are you a	citizen of the	United State	s? Γ	ΤΥ	es 🗌	No						
, , , , , , , , , , , , , , , , , , ,				_								
If not, provide	e your country	y of citizens	hip:									
If	.41:4 .:4:											
If you are a n	aturanzed citi	zen, state:										
Place of natur	ralization, inc	luding Cour	t grantin	ng na	aturaliz	ation:						
		-										
Date of natura	alization:											
Petition Num	ber:											
Certificate Nu	Certificate Number:											
If you are an	f you are an alien, state the "A" number from your Alien Registration Card:											

If you are a naturalized citizen of the United States or a non-citizen, you must attach a copy (front and back) of any Certificate of Naturalization, Resident Alien Card, Permanent Resident Card, Employment Authorization Document/Card, Refugee Travel Document, Form I-94, or other U.S. travel and identity document, including IRS Individual Tax Identification Number (ITIN), as applicable. Submit as Exhibit 2.

3.	Provide any additional business address(es) not disclosed previously on this Form: Submit additional information as Exhibit 3.							
4.	Provide any additional/current residential address(es) not disclosed in section 1 of this Form: Submit additional information as Exhibit 4.							
5.	Provide a copy (front and back) of your Driver's License as Exhibit 5.							
6.	Marital Informat	ion:						
Single [Married	Separa	ted 🗌	Divorced	Widowe	d 🗌 Eng	aged 🗌	Civil Union 🗌
	(a) Current	Marriage (o	r fiance	ર્ક):				
Date of	Marriage			Place (City	/County/State)			
					•			
Spouses	s' (Fiancé's) Full N	Name (Maid	en)			Social Se	curity Num	ber
Date of	Birth	Place of B	irth					
Residen	ice Address				City/State/Zip C	ode		
Telepho	one Residence:		Busin	iess:		Mobile:		
Spouse'	's (Fiancé's) Empl	oyer			Occupation			
Address	s of Employer			City/State		Zip Code		
	(b) Previou	s Marriages:	If even	legally sepa	arated, divorced, o	or annulled, in	ndicate belo	w:
Na	ame of Spouse	Date and	d Court Decr	of Order of ee	Date and F Marria		Natu	re of Action

List the name and current address of previous spouses:

Name	Address	City/State/Zip	Telephone
FAMILY INFO	RMATION		
Submit the follo	owing information about yo	our children and Dependen	nts, including step-children and
		parents-in-law and legal	guardians; your brothers and
sisters, including	g step-brothers and sisters.		
(a) Childre	n and Dependents:		
		children and adopted chi	ldren and give the following
informa		•	
Name	Birth Date	Birth Place	Residence Address
Name	Dirtii Date	Dirtii Flace	Residence Address
	upport Information:		
Please	mark the appropriate respon	se:	
□Lan	n not subject to a court order	r for the support of a child	
	Thot subject to a court order	i for the support of a clind.	
			support of one or more children
			r plan approved by the State's
	ney or other public agency and to the order (provide ev		repayment of the amount owed
purst	and to the order (provide ev	recirce of compitance as Ex	Milott 1 D), 01
			support of one or more children
			or plan approved by the State's
atto	rney or other public agency.	•	
State's atto	orney or public agency respo	onsible for enforcing the ch	ild support order, agreement or pla
Name _			
Addres	S		
Contac	Person		

List names, residence address, dates of birth, and most recent occupations of parents, parentsin-law, or legal guardian. If retired or deceased, list last address and occupation. Birth Date Address Occupation Retired/Deceased Name (Maiden) Father Mother Father-in-law Mother-in-law (d) **Brothers and Sisters** List names, residence address, dates of birth, and most recent occupations of brothers and sisters and of their respective spouses. Retired/Deceased Name (Maiden) Birth Date Address Occupation Spouse Spouse Spouse Spouse 8. **EDUCATION** Submit the following information for all of the schools which you have attended starting with elementary school: Graduate (Date Name of School Location Dates Attended Degree/Major Graduated) Elementary School Junior High School High Yes □ No School College/ Yes ☐ No University College/

(c)

University

Other

Parents:

Yes

MILI	ΓARY	
(a)	State	whether you registered for the selective service: Yes No
(b)		ibe the military service, including Reserve service or National Guard service, which you performed:
	(1)	Branch of Service:
		Date of Entry:
		Date of Separation:
		Type of Discharge:
		Rank at Separation:
		Serial number:
	(2)	Branch of Service:
		Date of Entry:
		Date of Separation:
		Type of Discharge:
		Rank at Separation:
		Serial number:
	(3)	Branch of Service:
		Date of Entry:
		Date of Separation:
		Type of Discharge:
		Rank at Separation:
		Serial number:
(c)	proce	u were ever the subject of any judicial or non-judicial investigation or disciplinary eding, including summary actions, trials or courts-martial, or were ever arrested during the e of your military service, provide all details:
(d)		it additional information as Exhibits 9(b) or 9(c) as applicable, and submit a copy of your ry discharge record (DD214) as Exhibit 9(d).

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10. LICENSE AND GAMING HISTORY

List any business, technical or professional licenses, permits, certifications that you have held, applied for, or otherwise have been affiliated with, in any state or jurisdiction, including Illinois. If additional space is needed, attached in the same format and submit as Exhibit 10(a).

License, Permit, **Business name (if applicable)** State Date applied \mathbf{or} for, Certification #, & **jurisdiction** and years held Type Gambling Coinoperated amusement device Liquor Other Has had, or been affiliated with, any license, permit, or certification that has been subject to (b) denial, non-renewal, suspension, revocation, fine, or any regulatory action, or criminal proceeding. in any jurisdiction? Yes No If yes, provide complete details and submit as Exhibit 10(b). (c) Has withdrawn an application for any license, permit or certification in any jurisdiction? ☐ Yes ☐ No If yes, provide complete details and submit as Exhibit 10(c). (d) Have you ever been involved in a gambling related business in any state, country, or other jurisdiction, though never issued a license or permit? Yes No If yes, provide complete details and submit as Exhibit 10(d). Have you ever owned, sold, operated, leased, provided for use, facilitated, enabled, participated in, (e) or been alleged by any governmental agency of, the use of coin-operated amusement devices for gambling purposes? Yes No If yes, provide complete details, including dates for all such activities, and submit as Exhibit 10(e). Have you ever owned, sold, operated, leased, provided for use, facilitated, enabled, participated (f) in, or been alleged by any governmental agency of, the use of any type of coupon or sweepstakes If yes, provide complete details, including dates for all such activities, and submit as Exhibit 10(f). Have you ever appeared on a Gaming exclusion list in any jurisdiction? \(\subseteq \text{Yes} \subseteq \text{No} \) (g) If yes, provide complete details on a separate sheet of paper and submit as Exhibit 10(g). (h) Have you ever been the subject of any order, judgment, or decree of any court or any order of an administrative agency, board, or body prohibiting you from, or otherwise limiting your type of business, practice or authority? \(\subseteq \text{Yes} \subseteq \text{No} \)

If yes, provide complete details and submit as Exhibit 10(h).

substai	all that apply regarding your relationship to the Licensee/Applicant or the parent company or ntial owner thereof for which you are submitting this Individual Key Person Personal Disclosure
Form:	Ownership of 5% or greater of an Applicant/Licensee
	Ownership of 25% or greater of an Applicant/Licensee
	Trustee, Administrator, Grantor, or Beneficiary of a Trust holding such ownership percentage
	Designated Key Person, Officer and/or Director
	Have ability to exercise control or influence over management or operations of Licensee
	Other
Submi	t as Exhibit 11 any explanation.
Licens	ny, of a holder of or Applicant for an Owners License, Supplier's License, Organization Gaming e, Master Sports Wagering License, Management Services Provider License, Tier 2 Official League rovider License, or the parent company or Substantial Owner thereof:
If appl for an Licens	t additional information as Exhibit 12. icable, describe your present or planned investment/ownership interest in any holder of or Applicant Owners License, Organization Gaming License, Master Sports Wagering License, Supplier's e, Management Services Provider License, Tier 2 Official League Data Provider License, or in the company or Substantial Owner thereof, including:
(a)	Amount to be invested in the business \$
	Percentage of ownership this will represent
(b)	Investment will be derived from the following sources: (Submit executed agreements for all financial transactions)

15.	firm, o	r corporation, or has any agreement been entered into whereby your interest is to be assigned, or sold either in part or in whole? Yes No					
	(a)	If yes, submit as Exhibit (15a) additional information and copies of all agreements and memoranda, along with any other documentation maintained, and a detailed summary of all oral agreements concerning all of the financial transactions relating to the investment.					
	(b)	Submit as Exhibit (15b) additional information and copies of all memoranda, along with any other documentation of and a detailed summary of all oral agreements relating to each assignment, pledge or agreement.					
16.		te total amount of annual Compensation you expect to receive from the Applicant/Licensee, or from tent company or Substantial Owners thereof. (Wages, bonuses, other):					
	Provide	e as Exhibit 16 copies of any employment agreements or contracts, if applicable.					
17.	Are you or any of your Relatives a current or past member, employee, contractor (or work for a company that contracted), of the Illinois Gaming Board. If yes, provide all details, including dates, positions held, etc. as Exhibit 17.						
18.		u or any of your Relatives a current or past member of the Illinois Legislature? If yes, provide all including dates, positions held, etc. as Exhibit 18.					
19.	State w	hether you or any of your Relatives:					
	(a)	have been convicted of any violation of Article 28, Gambling and Related Offenses, of the Criminal Code of 1961, 720 ILCS 5/28-1 et seq., or of similar laws of any other jurisdiction; Yes No					
	(b)	have been convicted of a misdemeanor involving dishonesty or moral turpitude under the laws of Illinois, any other State or any other jurisdiction; Yes No					
	(c)	have been convicted of a misdemeanor involving dishonesty or moral turpitude under the laws of Illinois, any other State or any other jurisdiction; Yes No					
	(d)	have had, or been affiliated with, a license which was withdrawn, denied, revoked, non-renewed, suspended, or disciplined, by the Illinois Gaming Board, or in any other jurisdiction, or by any other licensing authority; Yes No					
	Exhibit non-ren	Inswer to any of the above subparagraphs is yes and to the extent not disclosed above, submit as 19 a detailed statement concerning the nature, facts and circumstances of each conviction, denial, newal, suspension, disciplinary action, or revocation of ownership interest in a license or license tion, including but not limited to, dates, addresses, courts, prosecuting and arresting agencies.					
20.	ARRES	STS, DETENTIONS, LITIGATIONS AND ARBITRATIONS: (Include arrests in which you were victed)					
	(a)	Have you ever been arrested, detained, charged, indicted, or summoned to answer for any criminal offense or violation for any reason whatsoever, regardless of the disposition of the event? (Except minor traffic citations.) Yes No					

If yes, give details in the space provided below AND attach a full written narrative of your recollection of each event. ALL ARRESTS MUST BE DISCLOSED, REGARDLESS OF OUTCOME. "Despite anything contained herein to the contrary, the Applicant, its Substantial Owners or any Key Persons of those entities are not obligated to disclose sealed or expunged records of a conviction or arrest."

Date of Arrest	Offense/Charge	Arresting/charging Agency	City, County, State	Disposition/Current Status (including date of disposition)			
(b)	Has a criminal indictment, information, or complaint ever been returned against you, but for which you were not arrested or in which you were named as an unindicted co-party? Yes No If yes, provide details as Exhibit 20(b).						
(c)	allegations of conduct that const breach of fiduciary duty, unfair Claims Act or any similar law in Yes No If yes, provide details as Exhit plaintiff/defendant; claimant/res	Has the Applicant been named as a defendant in any civil action based in whole or in part on allegations of conduct that constitute fraud, misrepresentation or omission of material information, breach of fiduciary duty, unfair or deceptive trade practices, or a violation of the Illinois False Claims Act or any similar law in any other jurisdiction. Yes No If yes, provide details as Exhibit 20(c). Include a detailed statement identifying the following: plaintiff/defendant; claimant/respondent; date filed; court case number; location/jurisdiction; allegation(s)/claim(s); and, disposition (including date of disposition).					
(d)	Has the Applicant been served wor has any reason to believe it is Yes No If yes, provide details as Exhibit	or has been the subject					
(e)	Have you ever been questioned commission or committee? If yes, provide details as Exhibit] Yes 🗌 No	, state, federal,	or law enforcement agency,			
(f)	Have you ever been subpoenage board or commission? \(\subseteq \text{Y} \) If yes, provide details as Exhibit	les 🗌 No	before a federal	, state, or county grand jury,			

(g)

If yes, provide details as Exhibit 20(g).

Have you ever been subpoenaed to testify for any civil, criminal, or administrative proceeding or

(h	☐ Ye	Have you ever had a criminal record expunged or sealed by a court order? Yes No If yes, when?city, county, and state					
(i)	☐ Ye If yes,	s		city,	, county and sta	r any criminal offense? tte tils as Exhibit 20(h) & (i)	
(j)			of your family on If yes, give det			ever been convicted of a	felony?
Name	Relation	nship	Charge Case Number	Location	/Jurisdiction	Disposition/Date	Arresting Agency
(k	corpora plaintif	ntion, ever of or defende of No	been a party to ant or in an arbi	o a lawsui tration as e	it, including acither a claiman	or owner, director, or dministrative proceeding t or respondent? (Other the including bankruptcies.	s, as either a
	Defendant Respondent	[Case Location/Jurisdiction Status (including date Allegati					Allegation
(I) (n	jurisdic owner, n) Has an closely partner Ye	etion for your director, or y general public held corport been a part of the corport of the corp	ou as an individe officer of a corport partnership, limi	lual, memb poration. ted liabilit you were	oer of a partne y company, bu associated with	hreatened Material Litigrship or limited liability asiness venture, sole proph it as an owner, office?	company, or prietorship, or
Name of Entity	Type of Entity	Date Filed	Location/Jur	isdiction	Litigation Arbitration	Disposition/Current Status (including date of disposition	Allegation

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21.	(a)	Have you ever had any debt that was either adjusted, deferred, suspended or a payment plan was worked out to satisfy said debt? Yes No If yes, please explain and provide any additional documentation as Exhibit 21(a).
	(b)	Have you ever filed bankruptcy?
	(c)	Has a lien been filed against you by an individual, corporation or any governmental agency (i.e. city, state or Federal). This is against you as an individual, sole proprietor, member of a partnership, owner of a corporation or similar capacity? Yes No If yes, provide documentation and details as Exhibit 21(c).
22.	crimii	your Federal Income Tax Return or any State Income Tax Return ever been audited, adjusted or nally investigated? Yes No No, furnish details as Exhibit 22.
23.		it as Exhibit 23 the following information for all of the residences where you have resided during the 5 years:
	(a)	Street address
	(b)	City, county and state
	(c)	Country
	(d)	Dates, by month and year, or residence
24.	includ	it as Exhibit 24 the following information detailing your work history from age 18 to the present, ling all businesses with which you have been involved, all periods of self-employment, and all periods
		employment:
	(a) (b)	Dates, by month and year, when you held the position Name, address and telephone number of the employer or business
	(c)	Position title
	(d)	Description of the position and duties
	(e)	Name of your supervisor
	(f)	Reason you left the position
	(g)	If Gaming was part of the operations of the employer or business, provide all details
25.		it as Exhibit 25 a list of all Business Entities with which you have been associated as a Key Person, antial Owner or Substantial Creditor from age 18 to the present including:
	(a)	Dates, by month and year, you were associated in any capacity with the Business Entity
	(b)	Name, address and telephone number of the Business Entity and of its Registered Agent
	(c)	Description of the Business Entity
	(d)	Description of your association in all capacities with the Business Entity, including titles and duties relating to the Business Entity
	(e)	Reasons you became associated with and, if applicable, terminated your association with the Business Entity
	(f)	If Gaming was part of the operations of the Business Entity, provide all details
26.	Have	you ever held a License, other than a Driver's License issued by any state or other jurisdiction? Yes No
	Subm	it as Exhibit 26
	(1)	Type of license, describing the nature of the licensed conduct and activities
	(2)	State, or other jurisdiction, where the license was held
	(3)	Name, address and telephone number of the licensing authority(ies) which issued and/or regulated the license
	(4)	Dates, by month and year, when the license was held
	(5)	All details concerning any disciplinary proceedings (including all proposed or withdrawn, restrictions, revocations, suspensions, or non-renewals which you were subject to concerning the license
27	Comr	lete the chart below if you have ever withdrawn a gaming license application in any jurisdiction:

Тур	e of License Sought	Licensing Agency	Date Application Filed	Date Application Withdrawn	Reason for Withdrawal	
28.	a financial lottery, bod operation, of Yes	e license type, when and who ved, the names and addres	in a gambling venture, in pari-mutuel operation, in the State of Illinois or the ere held and give names	including a race track, d sports wagering operation outside the State of Illino and locations of the bus	og track, race horse, on, internet wagering ois?	
29.	related find	or any group in which you ling of suitability? what agency, where, when	No No	t been refused a gaming	or liquor license or	
30.	Do you have any relatives either associated with or employed in the gaming or liquor industry? Yes No					
	If yes, state	e name, relation and associate	tion or employment.			
31.		ever held greater than a 5% peration? Yes N		pecuniary, financial or	other interest in any	
	If yes, subr	mit as Exhibit 31 the followi	ing for each Gaming Op	eration:		
	(b) Th (c) Th	ne dates, by month and year ne name, address and teleph ne current names, addresse gents and Key Persons	one number of the Gami	ing Operation	-	
		detailed description of the C	Gaming Operation and o	f your interest in the Gar	ming Operation	

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32.	ownership interest in any Business Entity which holds a license under the Act or which has applied of intends to apply for a license under the Act. Yes No				
	If yes,	submit any details as Exhibit 32.			
33.	been a	If not already disclosed in this application, have you or any Business Entity with which you are or have been associated in any capacity, been granted a Gaming license or a license to sell or distribute Alcoholic Beverages? Yes No			
	If so,	submit as Exhibit 33 the following for each license:			
	(a) (b) (c) (d) (e) (f)	the state, or other jurisdiction and licensing agency which granted the license the type of license describing the operations and activities licensed the location where the licensed activities occur or occurred identity of the Business Entity, if applicable, including the current names, addresses and telephone numbers of its Registered Agents and Key Persons, and a description of the activities of the Business Entity, including your relationship to it the dates, by month and year, when the license was held a detailed description of any discipline, restrictions, revocation or non-renewals to which the holders of the license were subjected, including your involvement in the situations or transactions which led to each discipline, restriction, revocation or non-renewal			
34.	Gamin other	Has any Business Entity which you are, or have been associated with in any capacity, been denied a Gaming license, or a related finding of suitability, a license to sell or distribute Alcoholic Beverages, or any other right or privilege by any agency or governmental entity, in any jurisdiction regulating Gaming, or the sale or distribution of Alcoholic Beverages? Yes No			
	If so,	If so, submit as Exhibit 34 the following for each denial:			
	(a) (b) (c) (d)	the state, or other jurisdiction and licensing agency which granted the license the type of license describing the operations and activities licensed the date when the denial occurred all details concerning the denial, including an identification of the Business Entity, if applicable, including the current names, addresses and telephone numbers of its Registered Agents and Key Persons, a description of the Business Entity and of your relationship to it, a description of the operations and/or activities for which approval was sought, and the reasons for the denial, including your involvement in the situations or transactions which led to the denial			
35.	interes	ny of your Relatives affiliated as a Key Person of or employee with, have an ownership or beneficial st in, or are creditors of, any Business Entity engaged in a Gaming Operation or in the Alcoholic age industry, including those outside Illinois? Yes No			
	If so,	submit as Exhibit 35 the following for each Business Entity:			
	(a) (b) (c) (d) (e) (f) (g) (h)	if applicable, the identity of your Relative the name, address and telephone number of the Business Entity the names, address and telephone numbers of the Business Entity's Registered Agents and Key Persons the amount of ownership or beneficial interest held by our or your Relative the amount of debt owed to you or your Relative by the Business Entity whether you or your Relative actively participates in the management or operation of the Business Entity a detailed description of the Business Entity and the Gaming Operation a detailed description of your or your Relative's interest or affiliation, including position or job title			
36.		by of your Relatives have any other interest or affiliation of any kind with a Business Entity engaged aming Operation or in the Alcoholic Beverage industry which has not been previously disclosed?			

		☐ Yes ☐ No			
	If so,	submit as Exhibit 36 the following for each Business Entity:			
	(a) (b) (c)	if applicable, the identity of your Relative the name, address and telephone number of the Business Entity the names, address and telephone numbers of the Business Entity's Registered Agents and Key Persons			
	(d) (e) (f)	the amount of ownership or beneficial interest held by our or your Relative the amount of debt owed to you or your Relative by the Business Entity whether you or your Relative actively participates in the management or operation of the Business Entity			
37.	Entity	Are you or any of your Relatives the Nominee, or hold any interest in trust, for any Individual or Business Entity in any Gaming Operation, or hold a 5% or greater interest in trust for any Individual or Business Entity in the Parent Company of any Gaming Operation? Yes No			
	If so,	submit as Exhibit 37 the following for each interest:			
	(a) (b) (c) (d) (e)	if applicable, the identity of your Relative the number of shares or the amount of other interest held by you or your Relative the full name and current address and telephone number of the beneficial owner a detailed description of the instrument creating the fiduciary obligation and beneficial interest a detailed description of the Gaming Operation involved, and of the interest held by you or your Relative			
38. To the extent not already disclosed in your response to Question 37:		e extent not already disclosed in your response to Question 37:			
	(a)	Do you hold any assets in a trust or do you control, manage or hold in trust any assets or liabilities for another person or entity? Yes No			
		If yes, attach a copy of all such trusts, and include a schedule of assets held by each trust. Provide details as Exhibit 38, including applicable copies of the Trust Agreements, the Trust Identification and Disclosure Forms for all such trusts, excluding land trusts, for which you are a grantor, trustee or beneficiary.			
39.	(a)	Do you have any direct, Indirect or Attributed legal or beneficial interest in, or are a Key Person of, any Business Entity outside the United States? Yes No			
		If yes, submit additional information as Exhibit 39(a).			
	(b)	Do you own or control any assets or liabilities located outside the United States? Yes No			
		If yes, provide details as Exhibit 39(b).			
40.		ou have any safe deposit box or other depository, or have access to or use any other Individual's or ess Entity's safe deposit box or depository? Yes No			
	If yes,	submit as Exhibit 40 the following information for each box or depository state:			
	(a) (b) (c) (d)	the name(s) under which the box or depository is held the box number or type of depository the location including the name, address and telephone number of any bank which maintains the box or depository a complete list of the contents			
41.		it as Exhibit 41 complete copies of your Federal and State tax returns for the last three (3) years, ling all applicable Forms W-2 and 1099.			

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42.	State your annual income for the	last three (3) calendar years itemized as follows:
	Year	
Annual (Gross Income \$	
Salary	\$	Source
	\$	
	Φ	Source
Interest	\$	Source
	¢	
	\$	Source
	\$	Source
	\$	
	Ψ	Source
Dividend	ls \$	Source
	\$	
	·	Source
	\$	Source
	\$	
		Source
Other	\$	Source
	\$	
		Source

Source

Annual Gross	Income \$	
innual Gloss	теоте ф	
Salary	\$	
		Source
	\$	
	Ψ	Source
Interest	\$	
		Source
	\$	
	Ψ	Source
	\$	Source
		Source
	\$	
		Source
Dividends	¢	
Dividends	\$	Source
	\$	
		Source
	\$	
	T	Source
	\$	Source
		Source
Other	\$	
		Source
	\$	
	Ψ	Source
	\$	
		Source
	\$	
	Ψ	Source

Year		
Annual Gross	Income \$	
Salary	\$	
Surar y	Ψ	Source
	\$	
	Ψ	Source
Interest	\$	
	·	Source
	\$	
		Source
	\$	
		Source
	\$	
		Source
Dividends	\$	Source
	\$	
	Ψ	Source
	\$	
		Source
	\$	
	· 	Source
Other	\$	
		Source
	\$	
		Source
	\$	-
		Source
	\$	

Source

43. NET WORTH STATEMENT: Submit as Exhibit 43, a current Net Worth Summary, and Schedules, in the Excel format provided on the IGB website. Net Worth information for each Key Person is generally required on a calendar year basis. However, if the Key Person is funding the Licensee via contributions or other forms of financing, a more current net worth statement may be required. Please refer to the 'Period of Submission Reference Chart', located on the IGB website: www.igb.illinois.gov/riverboatforms.aspx, for specific date requirements. Using a date more current than listed in the chart is always allowed.

NOTES:

- When preparing the net worth schedules, please complete schedules 'A' through 'O' first. The totals on these schedules will automatically carry to the Summary schedule.
- Please note the details requested within the Net Worth schedules. Failure to timely submit all requested information may subject the Licensee to disciplinary action and/or impact final action for licensure by the IGB.

SOU	RCE AND	O APPLICATION OF FUNDS FROM
		(Name of Key Person Applicant)
FOR	INVEST	MENT IN
		(Name of Licensee/Applicant) (Date)
	u are an cation.	investor, or providing funds to the Licensee/Applicant, this form must be submitted with you
A.	Source	e of Funds to be used for this investment:
	1.	Personal funds (attach schedule – provide documents evidencing the source and availability of personal funds being invested) \$
	2.	Loans from lending institutions (attach schedule – provide loan documents)\$
	3.	Loans from individuals and business entities (<u>attach schedule</u> – identify the individual or business and provide loan documents) \$
	4.	Other forms of investment (attach schedule – provide detail including sources and amounts)\$
Δddi	tionally:	Total Funds committed for this investment
Addi	donarry.	
	•	Are any of the funds sought, subject to any contingencies which would prohibit such funds from being obtained, if so provide a detailed summary.
	•	Provide all alternative sources of funding which will be considered in the event that components of the initial funding proposal are not obtained.
	•	Provide a timeline which describes when the pre-opening funding will be sought and obtained.
	•	List all persons and entities which have or will be involved in obtaining pre-opening funds.
B.	Expen	ditures or other disposition of available funds:
	1.	Funds contributed toward investment to date (attach schedule of payments)\$
Addi	tionally:	
	•	Provide a detailed summary of all funds not obtained to date. List the status of obtaining these remaining funds.
	•	Detail all compensation, fees, commissions or any other form of payment paid or to be paid to any person or entity involved in obtaining any funds.
	•	Detail any contingency compensation, fee, commission or payment agreement to be paid to any person or entity involved with obtaining funds.
	•	For any payments made or to be made for obtaining funding, provide a detailed description of the services to be provided by the recipients of such payments. Provide documentation of any payment agreement entered into.
	•	Provide a detailed summary of expenditures of available funds prior to opening and all accrued pre-opening liabilities to date.

INDIVIDUAL KEY PERSON PERSONAL DISCLOSURE FORM SCHEDULE OF EXHIBITS

 Complete Name of Applicant

If an Exhibit is not applicable, indicate N.A.

Exhibit Number	Person who prepared or directed preparation of Exhibit (state which)	Official Title
2	(
3		
4		
5		
6a		
6b		
7a		
7b		
7c		
7d		
8		
9a		
9b		
9c		
9d		
10a		
10b		
10c		
10d		
10e		
10f		
10g		
10h		
11		
12		
13a		
13b		
14		
15a		
15b		
16		
17		
18		
	1	<u> </u>

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19a	
19b	
19c	
19d	
20a	
20b	
20c	
20d	
20e	
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20g	
20h	
20i	
20j	
20k	
201	
20m	
21a	
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21c	
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39a	
39b	
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41	
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43	

VERIFICATION

)	
County of) ss)	
I,		, being first duly sworn upon oath or
affirn	nation, depose and state:	
1.	I am the individual submitting this Fe	orm.
2.	I personally supplied the information	contained in this Form.
3. I swear (or affirm) that the information contained in this Form is true, con and accurate to the Best of My Knowledge.		
		Individual's Name (printed)
		Signature
		Date:
SUBSCRIBE	ED and SWORN to before me this	
day	of, 20	
Notary Publi	c	
Notary Publi	c in and for the	
County of		
State of		

AFFIDAVIT OF FULL DISCLOSURE

State of)	
State of)	
I,affirmation, depose and state,	_, being first duly sworn upon oath or
that, except as reported in the Applicant's/m agreements or understandings with any person or ent nominee or otherwise any interest in the Application;	
that, except as reported in the Application, I hany person or entity and no intent to pay any sums including but without limitation, a finder's fee or con any interest in the Application;	s of money or give anything of value as,
that, except as reported in the Application, I h no intent to pay any sums of money or give any limitation, a finder's fee or commission to any person in the Application.	thing of value as, including but without
	Individual's Name (printed)
	Individual's Signature
SUBSCRIBED and SWORN to before me this	Address
, day of, 20	
Notary Public	
Notary Public in and for the	
County of	
State of	

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INDIVIDUAL'S REQUEST TO RELEASE INFORMATION

TO:	
FROM:	
	Individual's Name

- 1. I hereby authorize and request all persons or entities to whom this request is presented having information relating to or concerning me to furnish such information to a duly appointed agent of the Illinois Gaming Board, whether or not such information would otherwise be protected from disclosure by any constitutional, statutory or other legal privilege.
- 2. I hereby authorize and request all persons or entities to whom this request is presented having documents relating to or concerning me to permit a duly appointed agent of the Illinois Gaming Board to review and copy any such documents, whether or not such documents would otherwise be protected from disclosure by any constitutional, statutory or other legal privilege.
- 3. If the person or entity to whom this request is presented is a brokerage firm, bank, savings and loan, or other financial institution or an officer of same, I hereby authorize and request that a duly appointed agent of the Illinois Gaming Board be permitted to review and obtain copies of any and all documents, records or correspondence pertaining to me, including but not limited to past loan information, notes co-signed by me, checking account records, savings deposit records, safe deposit box records, passbook records, and general ledger folio sheets.
- 4. I do hereby make, constitute, and appoint any duly appointed agent of the Illinois Gaming Board my true and lawful attorney in fact for me in my name, place, stead, and on my behalf and for my use and benefit:
 - a) to request, review, copy, sign for, or otherwise act for investigative purposes with respect to documents and information in the possession of the person or entity to whom this request is presented as I might;
 - b) to name the person or entity to whom this request is presented and insert that person's or entity's name in the appropriate location on this request;
 - c) to place the name of the Illinois Gaming Board agent presenting this request in the appropriate location on this request.
- 5. I grant to said attorney in fact full power and authority to do, take, and perform all and every act and thing whatsoever requisite, proper, or necessary to be done, in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as I might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that said attorney in fact, or his substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted.

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- 6. This power of attorney ends eighteen (18) months from the date of execution or at the termination of all licenses issued to Applicant/me by the Illinois Gaming Board, whichever occurs later.
- 7. I do, for myself, my heirs, executors, administrators, successors and assigns, hereby release, remise, and forever discharge the person or entity to whom this request is presented, and his or its agents and employees from any and all manner of actions, causes of action, suits, debts, judgments, executions, claims, and demands whatsoever, known or unknown, in law or equity, which I ever had, now have, may have, or claim to have against the person or entity to whom this request is presented or his or its agents or employees arising out of or by reason of complying with this request.
- 8. I agree to indemnify and hold harmless the person or entity to whom this request is presented and his or its 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.
- 9. A reproduction of this request by photocopy shall be for all intents and purposes as valid as the original.

IN WITNESS WHEREOF, I have executed the	his request at	•
	(City
on the	day of	, 20
State	·	
	Individu	ıal's Signature
SUBSCRIBED and SWORN to before me this		
day of, 20		
Notary Public	G. CHILL G	
Notary Public in and for the	Signature of Illinois Gaming Board Agent presenting this request:	
County of		
State of	Date:	

RELEASE OF ALL CLAIMS

The undersigned has filed with the Illinois Gaming Board ("Board") certain forms and documents in connection with a written request for licensing by the Board ("Application"). In consideration of the assurance by the Board that no vote on said Application will be taken except after a 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 State of Illinois, the Board, its members, agents, and employees, from any and all manner of actions, causes of action, suits, debts, judgments, executions, claims and demands whatsoever, known or unknown, in law or equity, which the undersigned ever had, now has, may have, or claim to have against any or all of said entities or individuals arising out of or by reason of the processing or investigation of or other action relating to the Application.

I, the undersigned, read this release and with full knowledge of its significance.		I execute it voluntarily
IN WITNESS WHEREOF, I have e	executed this release at	
, on the		
State , on the	, in the state of	20
		Individual's Signature
SUBSCRIBED and SWORN to before me	this	
day of, 20		
Notary Public		
Notary Public in and for the		
County of		
State of		

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IMPORTANT – To Prevent Delays in Processing Please Read and Follow These Instructions: Instructions for 4506-T Request for Transcript of Tax Return

Tax transcripts of your individual income tax returns are required for the previous five years by the Illinois Gaming Board in order to complete your application. The following two options are acceptable ways to obtain transcripts of your federal tax returns:

1)Tax transcripts may be viewed and printed instantaneously online at http://www.irs.gov/Individuals/Get-Transcript. You will be required to create an account with the IRS with a valid email address. You will need to provide your name, social security number, date of birth, filing status and the street address you provided on your last tax return you filed. You will also need to enter a few identity verification questions only you can answer, such as your previous address, mortgage information, etc.

-OR-

- 2) You can complete Form 4506-T Request for Transcript of Tax Return and fax the form to the IRS. This form is available from the IRS at http://www.irs.gov/pub/irs-pdf/f4506t.pdf . Please follow the following instructions when completing the form:
 - Parts 1a & 1b: Enter Name and Social Security Number listed on Tax Return.
 - Parts 2a and 2b: Fill in Part 2a and 2b if any of the requested tax years include a joint filer.
 - Part 3: Enter Current Name and Address.
 - Part 4: Complete this section if any of the requested tax years were filed using a different address.
 - Part 6: Enter the tax form number (1040).
 - Part 6b: The Illinois Gaming Board requires Account Transcripts for Form 1040. Check box 6b
 - Part 9: Enter the ending date of the of the calendar year in mm/dd/yyyy format for each income tax filing period.
 - SIGN and DATE the Form Note: Must be signed by the person who signed the tax return(s).

Any amendments or changes to the form which have been crossed-out will need to be initialed and dated.

Once you receive your tax transcripts, please mail or fax the transcripts to:

Illinois Gaming Board Financial Analysis Unit 801 South Seventh St. Suite 400 – South Springfield, IL 62703 Fax: 217-524-0228

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