

**VIDEO GAMING LOCATION APPLICANT'S
AUTHORIZATION TO RELEASE TAX INFORMATION**

I, _____, (print name of Video Gaming Location Applicant, include d/b/a name for a sole proprietor) hereby authorize the Illinois Department of Revenue ("IDOR"), and any of its agents and/or employees, to disclose my compliance with Illinois tax laws to the Illinois Gaming Board ("IGB") for the limited purpose of reviewing my application for a license issued by the IGB. Except as authorized by this waiver, the IGB must maintain the confidentiality of any tax return information received from IDOR, as required by 35 ILCS 5/917 and 35 ILCS 120/11.

I certify under penalties of perjury that I am the taxpayer identified below or an agent authorized to certify on its behalf.

Name and Title of Authorized Agent (printed): _____

Signature of Authorized Agent: _____ Date: _____

Address of Video Gaming Location Applicant : _____

Telephone Number: _____

Social Security Number (if Video Gaming Location Applicant is a sole proprietor): _____

Illinois Business Tax Number: _____ FEIN: _____