

ILLINOIS GAMING BOARD

160 North LaSalle Street, 3rd Floor
Chicago, Illinois 60601
312-814-4700



VIDEO GAMING TECHNICIAN / TERMINAL HANDLER / SALES AGENT AND BROKER LICENSE APPLICATION

(for use only by applicants seeking a Technician and/or Terminal Handler license(s) and individual applicants seeking a Sales Agent and Broker License.)

Name of Individual Applicant submitting this Application:

Date:	
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Application for (one or more): Technician Terminal Handler Sales Agent and Broker

Technician/Terminal Handler

Please indicate if you are filing this application due to your affiliation with an applicant for, or holder of, a license listed below. If you are not affiliated with an applicant for, or holder of, a license listed below, please check other and specify:

Terminal Operator Distributor Manufacturer Supplier

Other: _____

Name of affiliated Applicant/Licensee: _____

Sales Agent and Broker

Name of licensed Terminal Operator(s) on whose behalf the Applicant will act as a Sales Agent and Broker:

1.	
2.	
3.	

The business entity is not currently affiliated with a licensed Terminal Operator. (If not affiliated, you are required to promptly notify the Illinois Gaming Board of any future relationship with a licensed Terminal Operator).

INSTRUCTIONS FOR VIDEO GAMING TECHNICIAN, VIDEO GAMING TERMINAL HANDLER AND VIDEO GAMING SALES AGENT AND BROKER LICENSE APPLICATION

WARNING

BY FILING THIS APPLICATION, 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 APPLICATION, 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.

Read the entire form before responding to the questions.

All Applicants are advised that this Application is an official document. Applicant should respond to the questions contained herein to the Best of his or 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. “A person who knowingly makes a false statement on an application is guilty of a Class A misdemeanor.” 230 ILCS 10/9(f).**

Applicant is under a continuing duty to disclose promptly any changes in the information provided in the Application and additional information and materials submitted to the Illinois Gaming Board. The duty to make such additional disclosures shall continue throughout any period of licensure granted by the Illinois Gaming Board.

Type or print the answers to questions in black ink. **All signatures should be in blue ink.** If a question does not apply to you, so state with “N/A.” If space available is insufficient, continue on a separate sheet of paper and precede each answer by labeling the section to which it is responsive. Applicant must initial each page, as provided in the lower right-hand corner. By placing your initials on each page, Applicant is attesting to the accuracy and completeness of the information contained on that page.

For the purpose of this VIDEO GAMING TECHNICIAN/TERMINAL HANDLER/SALES AGENT AND BROKER LICENSE APPLICATION, the terms herein shall have the meanings as provided for in the Video Gaming Act (230 ILCS 40/) and/or the Adopted Rules for Video Gaming, as may be updated from time to time by the Illinois Gaming Board. The Video Gaming Act (230 ILCS 40/) and/or the Adopted Rules for Video Gaming are available at <https://igb.illinois.gov/video-gaming/video-law.html>.

SUBMISSION AND PAYMENT

Any **new individual** applying for a Terminal Handler, Technician or Sales Agent and Broker **license is required to make an appointment with an IGB Casino Office** to be interviewed and fingerprinted. The Application Fee will be accepted at the appointment.

If you are a registered Sales Agent Individual who has previously submitted an Exhibit 8D – Sales Agent/Broker Update Form to the IGB and are **only** applying for a Sales Agent and Broker License, the Application can be submitted on the Sales Agent and Broker Submission Page on the IGB website [Illinois Gaming Board](#) under Video Gaming; Applications and Forms. The Application Fee can be paid online by selecting the “Make a Payment to E-Pay” link at the bottom of the IGB website. The Applicant will select “Video Gaming Payments” and “Sales Agent Application Fees” from the drop-down menus.

**THE APPLICATION MUST BE SUBMITTED BY THE APPLICANT
IN PERSON BY APPOINTMENT ONLY**

The completed Application, with all required forms, documents and the application fee(s), must be submitted by the Applicant in person, by appointment only, at any one of the following Illinois Gaming Board casino offices:

Argosy Casino Alton 1 Piasa Street Alton, IL 62002 618-474-7543	Harrah's Metropolis Casino 101 Metropolis Street Metropolis, IL 62960 618-524-6455	Walker's Bluff 777 Walker's Bluff Way Carterville, IL 62918 618-442-7950
Bally's Quad Cities Casino 777 Bally Blvd Rock Island, IL 61201 309-756-4771	Hard Rock Casino Rockford 7801 East State Street Rockford, IL 61108 779-368-7370	Fairmount Park Inc. 9301 Collinsville Road Collinsville, IL 62234 618-345-4300
Harrah's Joliet Casino 151 North Joliet Street Joliet, IL 60432 815-740-7866	Par-A-Dice Casino 21 Blackjack Blvd. East Peoria, IL 61611 309-698-1518	American Place Casino 600 Lakehurst Road Waukegan, IL 60085 815-240-5786
Rivers Casino 3000 South River Road Des Plaines, IL 60018 847-768-5205	Hollywood Casino Aurora 1 New York Street Aurora, IL 60506 630-801-7074	Golden Nugget Casino 204 Eastgate Drive Danville, IL 61834 217-271-8126
DraftKings at Casino Queen 200 South Front Street East St. Louis, IL 62201 618-874-5073	Grand Victoria Casino 250 South Grove Avenue Elgin, IL 60120 847-531-7756	Wind Creek Casino 17300 S. Halsted Street East Hazel Crest, IL 60429 224-605-3977
Hollywood Casino Joliet 1401 Gateway Blvd. Joliet, IL 60431 815-927-7886	Bally's Chicago 640 N. LaSalle St., Suite 460 Chicago, IL 60654 872-278-8846	

**Attention: You must schedule an appointment to submit your Application.
Walk-ins without an appointment will be turned away.**

Individuals submitting this Application are required to be fingerprinted at the time of their appointment under the Video Gaming Act and Adopted Regulations (fingerprint checks will include the criminal history records of the FBI).

REQUIRED FORMS AND DOCUMENTS YOU MUST BRING TO THE APPOINTMENT FOR SUBMISSION OF THE APPLICATION

A completed Application and the following properly executed forms, documents and application fee are required prior to the processing of this Application:

1. Schedule of Exhibits.
2. A current photograph of you.
3. Copy of government issued Driver's License or Identification Card
4. Birth certificate.
5. Request to Release Information.
6. Release of All Claims.
7. Request for Transcript of Tax Return – Form 4506-T (for the last 4 years).
8. Copy of signed Sales Agent/Broker Agreement, if applicable.
9. The following Application fee via personal check, cashier's check or money order payable to the "Illinois Gaming Board" (DO NOT PAY WITH CASH):

Technician: \$100.00 Terminal Handler: \$100.00 Sales Agent and Broker: \$100.00

Following the submission of your Application, and following a background investigation of the Applicant, the Illinois Gaming Board will send you notice if you are found suitable for licensing. Upon receipt of this notice, promptly submit the following annual license fee via personal check, cashier's check or money order payable to the Illinois Gaming Board (DO NOT SEND CASH). The Annual License Fee can also be paid online by selecting the "Make a Payment to E-Pay" link at the bottom of the IGB website:

Technician: \$100.00 Terminal Handler: \$100.00 Sales Agent and Broker: \$100.00

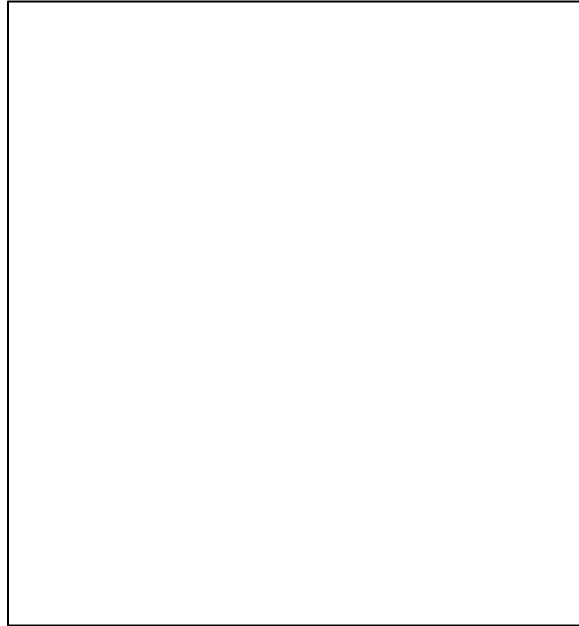
Payments must be made payable to the "Illinois Gaming Board" and sent to the following address:

Illinois Gaming Board
801 South Seventh Street
Suite 400 – South
Springfield, Illinois 62703
Attn: Revenue Accounting

Your license will be issued when you are found suitable and the annual license fee is received.

Please note: If you are a registered Sales Agent Individual who has previously submitted an Exhibit 8D – Sales Agent/Broker Update Form to the IGB and are **only** applying for a Sales Agent and Broker License, you do not need to appear in person and the Application can be submitted on the Sales Agent and Broker Submission Page on the IGB website Illinois Gaming Board under Video Gaming; Applications and Forms. The Application Fee and Annual License Fee, if you are found suitable, can be paid online by selecting the "Make a Payment to E-Pay" link at the bottom of the IGB website.

ATTACH RECENT COLOR PASSPORT QUALITY PHOTOGRAPH OF YOURSELF



ATTACH A COPY OF THE FRONT AND BACK OF YOUR GOVERNMENT ISSUED DRIVER'S LICENSE OR IDENTIFICATION CARD



ATTACH A COPY OF YOUR BIRTH CERTIFICATE HERE (IF IT IS SMALL) OR INSERT BETWEEN PAGES 10 & 11. IF A BIRTH CERTIFICATE IS NOT AVAILABLE, ONE OF THE FOLLOWING WILL BE ACCEPTABLE:

- Naturalization papers; or
- A copy of a letter from you to the appropriate government agency requesting a birth certificate. The letter must show both the name and address of the agency from which the birth certificate is requested. Your application will not be considered for licensure until your birth certificate is submitted to the Illinois Gaming Board.

SECTION 1 - PERSONAL INFORMATION

Name (Last, First, Middle)					
Alias Names (nicknames, other name changes, legal or otherwise)				Maiden Name	
Street Address			City/State/Zip Code		
Telephone:		Residence ()	Business ()	Mobile ()	
Occupation			Email Address		
Employer Name		Employer Address (street address/city/state/zip code)			
Date of Birth	Age	Place of Birth (city, county, state or country)		Social Security Number	
Sex	Eye Color	Hair Color	Complexion	Height	Weight
Scars, Tattoos, or Distinguishing Marks			Driver License or State I.D. Number & State of Issue		
Are you a U.S. citizen? If no, attach copies of both sides of your work permit card and submit as Exhibit 1(a).					
U.S. military service (branch and dates of service): Type of discharge:					
Submit as exhibit 1(b) a copy of your military discharge record (DD214)					

List all places of residence for the last 10 consecutive years (including foreign residences) *not including* your current residence. If additional space is needed, attach additional sheets in the same format and submit as Exhibit 1(c).

Dates From – To	Street Address
City/State/Country/Zip Code	
Dates From – To	Street Address
City/State/Country/Zip Code	

Dates From – To	Street Address
City/State/Country/Zip Code	
Dates From – To	Street Address
City/State/Country/Zip Code	

SECTION 2 – FAMILY

- a. Are you or are any of your relatives* a current or past member or employee of the Illinois Gaming Board.
 Yes No If yes, provide complete details on a separate sheet of paper and submit as Exhibit 2(a).

Relative(s) means 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.

- b. In accordance with 5 Illinois Compiled Statutes 100/10-65(c), applications for renewal of a license or a new license shall certify, under penalty of perjury, that he or she is not more than 30 days delinquent in complying with a child support order. **Failure to certify shall result in disciplinary action, and making a false statement may subject the licensee to contempt of court.** Are you more than 30 days delinquent in complying with a child support order? Yes No
 (Note: if you are not subject to a child support order, answer "no.") If yes, provide complete details on a separate sheet of paper and submit as Exhibit 2(b).

- c. Do you have any immediate family that own, manage or control a location establishment applicant or licensee or are otherwise involved in any aspect of Video Gaming in the State of Illinois? If additional space is needed, attach additional sheets in the same format and submit as Exhibit 2(c).

Family Members Last Name	First Name	Relation
Affiliated License Name		

Family Members Last Name	First Name	Relation
Affiliated License Name		

SECTION 3 - LICENSE AND GAMING HISTORY

- a. List any business, technical or professional licenses, permits, or certifications that you have held or applied for in any state or jurisdiction. If additional space is needed, attach additional sheets in the same format and submit as Exhibit 3(a).

	License, permit or certification number	Business name (if applicable)	State or jurisdiction	Date applied for and years held
Gambling				
Coin-operated amusement device				
Liquor				
Other				

- b. Has any license, permit, or certification identified herein ever been subject to denial, non-renewal, suspension, revocation or any regulatory action in any jurisdiction? Yes No If yes, provide complete details as Exhibit 3(b).
- c. 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 as Exhibit 3(c).
- d. Have you ever facilitated, enabled, or participated in the use of coin-operated amusement devices for gambling purposes or any type of coupon or electronic product promotion kiosks (sweepstakes machines)? Yes No If yes, provide complete details, including dates for all such activities, as Exhibit 3(d).

- e. Have you ever appeared on a gaming exclusion list in any jurisdiction? Yes No If yes, provide complete details as Exhibit 3(e).
- f. 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? Yes No If yes, provide complete details as Exhibit 3(f).
- g. Has a Terminal Operator previously submitted an Exhibit 8D – Sales Agent/Broker Update on your behalf? Yes No If yes, provide as Exhibit 3(g) a list of all Terminal Operators?
- h. Have you accepted a finder’s fee or any other compensation from another person or entity for services rendered in connection with the issuance of a gaming license in any jurisdiction? Yes No If yes, provide complete details as Exhibit 3(h).
- i. Have you ever offered or provided anything of value to any video gaming location, or any person related to or affiliated with a video gaming location as defined in Section 1800.350(a)(2) of the Board’s Adopted Rules for Video Gaming, as an incentive or inducement to locate, keep or maintain video gaming terminals at a video gaming location? Yes No If yes, provide complete details as Exhibit 3(i).
- j. Are you individually, or through a business entity that you own or control, licensed as a Video Gaming Manufacturer, Distributor, Supplier, Licensed Establishment, Licensed Fraternal Establishment, Licensed Veterans Establishment, Licensed Truck Stop Establishment and Licensed Large Truck Stop Establishment? Yes No If yes, provide complete details as Exhibit 3(j).
- k. Will you individually, or through a Business Entity, be receiving any Net Terminal Income pursuant to a contractual agreement for the services you provide? Yes No If yes, provide complete details as Exhibit 3(k).

SECTION 4 – LITIGATION HISTORY

Have you, as an individual, owner, director, or officer of a business entity ever been involved in any civil lawsuit which was based in whole or part on allegations of conduct which would constitute a crime or would amount to fraud, deceit or misrepresentation? Yes No If yes, give details of all such cases below. If additional space is needed, attach additional sheets in the same format and submit as Exhibit 4.

Plaintiff/Defendant Claimant/Respondent	Date filed	Court case number	Location/Jurisdiction	Allegation(s)/claim(s) and disposition (including date of disposition)

SECTION 5 – EMPLOYMENT HISTORY

List all employment and self-employment for the last 10 consecutive years that you worked. List current employment first. If additional space is needed, attach additional sheets in the same format and submit as Exhibit 5.

Dates From – To		Title	Supervisor
Employer			Phone
Street Address		City/State/Zip Code	
Reason for Leaving			

Dates From – To		Title	Supervisor
Employer			Phone
Street Address		City/State/Zip Code	
Reason for Leaving			

Dates From – To		Title	Supervisor
Employer			Phone
Street Address		City/State/Zip Code	
Reason for Leaving			

SECTION 6 – CRIMINAL HISTORY

Check yes or no in each box to answer whether you have or were:

- | | |
|---|---|
| 1. Fingerprinted? <input type="checkbox"/> Yes <input type="checkbox"/> No | 5. Placed on probation or supervision? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Arrested? <input type="checkbox"/> Yes <input type="checkbox"/> No | 6. Incarcerated? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Charged with a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No | 7. Forfeited bail? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. Convicted? <input type="checkbox"/> Yes <input type="checkbox"/> No | |

You must answer YES if any of the above has occurred, even if charges were not filed, dismissed, deferred or changed. Explain each in detail below. All arrests must be disclosed regardless of outcome. However, you are not obligated to disclose sealed or expunged records of conviction or arrest. If additional space is needed, attach additional sheets in the same format and submit as Exhibit 6.

ATTENTION: ALL ARRESTS MUST BE DISCLOSED, REGARDLESS OF THE OUTCOME!

Offense /event date	Offense /event	Arresting, charging or finger printing agency, and location (city, county, state)	Disposition/current status (including date of disposition)

DO NOT WRITE IN THIS BOX – TO BE COMPLETED BY AN ILLINOIS GAMING BOARD AGENT

<p>_____ Dated: _____</p> <p>Signature of Illinois Gaming Board agent confirming that the Applicant was appraised by the agent to fully disclose all arrests and other requested criminal history information.</p>

NOTE: IT IS YOUR CONTINUING DUTY TO **IMMEDIATELY NOTIFY** THE ILLINOIS GAMING BOARD OF ANY CHANGES TO YOUR APPLICATION, INCLUDING FUTURE ARRESTS. FAILURE TO DO SO MAY RESULT IN ILLINOIS GAMING BOARD DISCIPLINE, UP TO AND INCLUDING DENIAL OR REVOCATION OF YOUR LICENSE.

SECTION 7 – EDUCATION AND TRAINING

Submit as Exhibit 7 a detailed statement describing what training you have received, or plan to receive, to qualify you as a Licensed Technician, Licensed Terminal Handler, or Licensed Sales Agent and Broker (e.g., list any applicable vocational training, certifications, college training, industry experience, and/or any proposed future training or course work).

SECTION 8 – TAXES

Do you owe any past due taxes, fees or obligations to any local, state or the federal government? Yes No If yes, provide complete details on a separate sheet of paper and submit as Exhibit 8.

SECTION 9 – AFFILIATED BUSINESS ENTITY (Sales Agent and Broker)

Provide the information requested below if you intend to receive compensation for the solicitation of use agreements through a Business Entity that you own or control.

Each business entity disclosed must complete a Video Gaming Sales Agent and Broker License Application for Business Entities and be licensed as a Sales Agent and Broker prior to engaging in the solicitation of business.

Name of Business Entity		Doing Business As (D/B/A)	
Name of affiliated applicant or licensee for which this form is submitted:			
Street Address		City/State/Zip Code	
Mailing Address (if different)		City/State/Zip Code	
Business Phone	Facsimile		Email Address
Federal Employer Identification Number (FEIN)		Illinois Business Tax Number (IBT or Sales Tax Number)	

SECTION 10 – CERTIFICATION AND AUTHORIZATION

“I swear and certify under penalty of law that all answers and information provided by me in this Video Gaming Technician / Terminal Handler / Sales Agent and Broker License Application are true, correct and complete to the Best of My Knowledge. I acknowledge that any misrepresentation, failure to reveal or update information or omission is grounds for denial of a license and/or revocation of any license for which this Application is submitted. I acknowledge that I am under a continuing duty to disclose promptly any changes in the information provided in the Application and additional information and materials submitted to the Illinois Gaming Board. The duty to make such additional disclosures shall continue throughout any period of license granted by the Illinois Gaming Board. I hereby authorize the Illinois Gaming Board to investigate my criminal history, financial records and all other sources as necessary for licensing.”

Signature	Print Name	Date Signed (mm/dd/yyyy)
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APPLICANT’S SIGNATURE MUST BE NOTARIZED

SUBSCRIBED and SWORN to before me this

_____ day of _____, 20____

(Notary Public)

Notary Public in and for the

County of _____

State of _____

**VIDEO GAMING TECHNICIAN / TERMINAL HANDLER / SALES AGENT AND BROKER
LICENSE APPLICATION SCHEDULE OF EXHIBITS**

(Print 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
1(a)		
1(b)		
1(c)		
2(a)		
2(b)		
2(c)		
3(a)		
3(b)		
3(c)		
3(d)		
3(e)		
3(f)		
3(g)		
3(h)		
3(i)		
3(j)		
3(k)		
4		
5		
6		
7		
8		
9		
10		

**VIDEO GAMING TECHNICIAN / TERMINAL HANDLER / SALES AGENT AND
BROKER LICENSE APPLICANT'S REQUEST TO RELEASE INFORMATION**

TO: _____
(DO NOT WRITE ON THE ABOVE LINE – to be completed by the Illinois Gaming Board)

FROM: _____
(Print Name of License Applicant)

1. Applicant hereby authorizes and requests all persons or entities to which this request is presented having information relating to or concerning Applicant 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. Applicant hereby authorizes and requests all persons or entities to which this request is presented having documents relating to or concerning Applicant 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, Applicant hereby authorizes and requests 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 Applicant, including but not limited to past loan information, notes co-signed by Applicant, checking account records, savings deposit records, safe deposit box records, passbook records, and general ledger folio sheets.
4. Applicant hereby makes, constitutes, and appoints any duly appointed agent of the Illinois Gaming Board Applicant's true and lawful attorney in fact for Applicant in Applicant's name, place, stead, and on Applicant's behalf and for Applicant's 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 Applicant 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. Applicant grants 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 Applicant might or could do, 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.
6. This power of attorney ends eighteen (18) months from the date of execution or at the termination of all licenses issued relating to Applicant by the Illinois Gaming Board, whichever occurs later.

7. Applicant has filed with the Illinois Gaming Board an "Application." Applicant understands that the Application is seeking the granting of a privilege and acknowledges that the burden of proving Applicant's qualifications for a favorable determination is at all times on Applicant. Applicant accepts any risk of adverse public notice, embarrassment, criticism, or other action of financial loss, which may result from action with respect to this Application.
8. Applicant does, for itself, its 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 Applicant ever had, now has, 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.
9. Applicant agrees 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 attorneys' fees arising out of or by reason of complying with this request.
10. 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 this request at _____
 (City)

_____ on the _____ day of _____, 20____.
 (State)

 (Signature of Applicant)

 (Print Name)

SUBSCRIBED and SWORN to before me this

_____ day of _____, 20____

 (Notary Public)

Notary Public in and for the
 County of _____,
 State of _____.

Signature of Illinois Gaming Board
 Agent presenting this request:

 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, associations 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, _____, have read this release and understand its terms. I
(Print Name of Applicant)
execute this release with full knowledge that I will be bound hereby.

IN WITNESS WHEREOF, I have executed this release at _____,
(City)
_____ on the _____ day of _____, 20____.
(State)

(Signature of Applicant)

(Print Name)

SUBSCRIBED and SWORN to before me this
_____ day of _____, 20____.

(Notary Public)

Notary Public in and for the

County of _____, State of _____.

AFFIDAVIT OF FULL DISCLOSURE

State of _____

County of _____

I, _____, and being first duly sworn upon oath or affirmation,
(Name of Applicant)

depose and state:

that, except as has been reported in writing to the Illinois Gaming Board (“Board”), undersigned has no agreements or understandings with any person or entity and no present intent to hold as agent, nominee or otherwise any direct or indirect interest whatsoever in any licensed gaming operation or any portion thereof for which the Applicant associated with this Video Gaming Business Entity Sales and Broker License Application (“Application”) seeks licensing by the Board;

that, except as has been reported in writing to the Board, undersigned has no agreements or understandings with any person or entity and no present intent to transfer at any future time any direct or indirect interest whatsoever in or to a licensed gaming operation or any portion thereof for which the Applicant associated with this Application seeks licensing by the Board.

I have read this Affidavit of Full Disclosure and understand its terms. On behalf of and in accordance with the instructions, I execute this Affidavit of Full Disclosure with full knowledge that I will be bound hereby.

IN WITNESS WHEREOF, I have executed this affidavit at _____
(City)
_____ on the _____ day of _____, 20____.
(State)

(Name of Applicant)

(Signature)

SUBSCRIBED and SWORN to before me this
_____ day of _____, 20_____

(Notary Public)

Notary Public in and for the
County of _____
State of _____

**IMPORTANT – To Prevent Delays in Processing
Please Read and Follow These Instructions:
Instructions for 4506-T Request for Transcript of Tax Return
FOR TERMINAL HANDLER / TECHNICIAN / SALES AGENT AND BROKER
APPLICATIONS ONLY**

Tax transcripts of your individual income tax returns are required for the previous four years by the Illinois Gaming Board in order to complete your application.

Include a completed Form 4506-T Request for Transcript of Tax Return along with your application and we will fax the form on your behalf. 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
- **Parts 2a and 2b:** Fill in Part 2a and 2b if any of the requested tax years include a joint filer.
- **Part 3:** Enter your Current 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.
- **Part 6b:** The Illinois Gaming Board requires Account Transcripts. Check the box which corresponds to 6b.
- **Part 9:** Enter the ending date of the last four years in **mm/dd/yyyy** format.
- **SIGN and DATE the Form – Note: Only you need sign this Form.**

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

An incomplete form will delay the processing of your application.