

New Gaming Supplier Application Checklist

COMPANY

Supplier Name: _____

Contact Person: _____ Contact Phone: _____

Contact Email: _____ Contact Fax: _____

Please return with application

Business Entity Disclosure Form

Legible/Complete

Be sure the following documents are attached:

Item 4. Business Documents

Articles of incorporation with amendments

Item 5. Certificate of Good Standing (< 1 year)

Item 6. Authorization

Item 7. Bylaws with amendments

Item 9. Prior Gaming Applications

Item 10. Stock Description (Corporation)

Item 27. Financial Statements- for the last (3) three years

Item 29. Ownership Chart/Organizational Chart

Item 30. Tax Returns-(1120) for the last (3) three years

Application Fee - Check or Money Order

\$3,000

JPEG Image of Company Logo emailed to GC.Licensing@pokagonband-nsn.gov

Truth and Acknowledgement Form/American Checked Release Form

AN INCOMPLETE APPLICATION WILL BE RETURNED

Applicant Signature: _____ Date: _____