

VIRGIN ISLANDS OF THE UNITED STATES
VIRGIN ISLANDS CASINO CONTROL COMMISSION



BUSINESS ENTITY DISCLOSURE FORM

Business Entity Disclosure Form Instructions`

INSTRUCTIONS

I. COMPLETING THIS FORM

This application form must be completed by any individual or business organization required to hold a casino license pursuant to Title 32, Chapter 21, Article VI, §434 of the Virgin Islands Code, as well as any entity so directed by the Virgin Islands Casino Control Commission.

The following general instructions should be followed when completing this application. If questions arise during the course of completing the application submit your inquiry to info@casinocontrolcommission.vi.

- 1) Read each question carefully prior to answering. Answer every question completely. Do not leave blank spaces. If a question does not apply to you, indicate "N/A" in response to that question. If there is nothing to disclose in response to a particular question, write "None" in response to that question. Failure to provide a response to every question could result in the rejection of your application.
- 2) Applicant entity agrees that any license which may hereafter be granted to said individual or business organization is predicated upon the statements and answers contained herein and that for any materially false or misleading statement or answer, said license may be revoked. Entity's background will be investigated by the Virgin Islands Casino Control Commission.
- 3) False information or lack of total disclosure or any aspect of this application may result in license denial.
- 4) Information requested must be answered completely by all applicants. Such information is to be provided as of the date of application unless otherwise specified.
- 5) All entries on this form, except signatures, must be typed or block printed in black ink. This form if being provided in pdf fillable format, and can be completed online and transmitted via email, provided that at least one copy of the document is sent to the Virgin Islands Casino Control Commission via US Mail with an original signature. Illegible applications will not be accepted.
- 6) Where a response to a particular question is provided fully in response to another question elsewhere in this application, reference your answer to that other response by indicating "See response to question # ____". If a partial response is given elsewhere, indicate "See partial response to question # ____" and complete the requested information.
- 7) If you need additional space to answer any question(s), use additional pages. Indicate the number of the question you are answering if you use additional pages.
- 8) To prevent any misunderstanding on the applicants' part, the following terms are defined for your assistance in preparing this application:
 - a) Business organization - A partnership incorporated or unincorporated association, firm, corporation, trust or other form of business or legal entity, other than a financial institution regulated by a state or federal agency.
 - b) Control - The power to exercise authority over or direct the management and policies of a person or business organization.
 - c) Management - Any person(s) or entity (ies) having responsibility to manage, direct or administer the affairs of a person or business organization. Management includes, but is not limited to: members of the board of directors of a corporation, officers in charge of principal business functions, or principal owners.
 - d) Related - (of any licensee) - It's affiliates, principal owners management and members of their immediate families; and any other party who has the ability to significantly influence directly or indirectly, the licensee form fully pursuing its own separate management operating policies. This includes any power of attorney or fiduciary capacity delegated to any of the above.
- 9) Submit an original and one (1) copy of this entire form to the Virgin Islands Casino Control Commission via email and/or US Mail or Hand-Delivery accompanied with the proper fee or deposit required by law. The Commission will accept one copy via email (email to info@casinocontrolcommission.vi) and one original, which should be sent to the Commission address at: 3005 Estate Orange Grove, Christiansted VI 00820. Attention: Chairman
- 10) Once your application is filed with the Commission, you may not withdraw your application without the express consent of the Virgin Islands Casino Control Commission.

11) If you require further information or clarification of any aspect of this application, please contact the Virgin Islands Casino Control Commission at 340-718-3616 or via email at info@casinocontrolcommission.vi.

12) CASINO LICENSE APPLICATION AND REGISTRATION FEES

License Type	Description	Fee
Casino I	10,000 sq. ft. Each Additional 5,000 ft. or portion thereof	\$350,000 \$ 50,000
Casino II	7,000 sq. ft. Each Additional 5,000 ft. or portion thereof	\$150,000 \$ 50,000
Casino III	7,000 sq. ft. Each Additional 5,000 ft. or portion thereof	\$100,000 \$ 50,000
Other Casino Categories	*Enterprise Zone Casino's in Christiansted and Frederiksted *VIPA Hotel Casino Development (Act 6391) *Partial Government Owned Casino	Rates to be determined by the Commission
Hourly rate for casino investigations	Hourly rate for casino investigations, casino key and employee investigations, qualifier investigations (32VIC§510-§512)	\$120.00/hour
Slot Machine License Fee	32VIC §514 and Regulations §436-6.4	\$260.00/unit Due: July 1 st Annually
Racino License Fee	TBD by the Commission. Presently under review.	TBD
Casino Key Employee License	32VIC§441 and Regulation §436-6.10	Deposit: \$600 Minimum Expenses (Hourly investigation rate of \$120.00) Renewal: \$400.00 Two Year initial and renewal License

II. BEFORE YOU SUBMIT THIS FORM TO THE COMMISSION, BE SURE THAT:

- A. All attachments required in this form and in the Multi-Jurisdictional Personal History Disclosure Form are labeled with an exhibit number and included in both the original and the photocopies filed with the Commission.
- B. You have signed and notarized the Statement of Truth, Release Authorization, Consent to Inspections, Searches and Seizures forms included herein, along with those that are included in the Multi-Jurisdictional Personal Disclosure Form
- C. You have answered every question completely.
- D. You initial and date each page of this form in the spaces provided.
- E. You retain a completed copy of this form for your own records.

Business Entity Disclosure Form

NAME OF BUSINESS ENTITY (DO NOT ABBREVIATE)

Name as it appears on the Certificate of Incorporation, charter, by-laws, partnership agreement, formation documents or other official document.

D/B/A or Trade Name(s)

SOLE PROPRIETOR LIMITED LIABILITY PARTNERSHIP LIMITED PARTNERSHIP GENERAL PARTNERSHIP
UNINCORPORATED ASSOCIATION CORPORATION LIMITED LIABILITY COMPANY OTHER:

TYPE OF BUSINESS ENTITY (CHECK ONE)

PERSON TO BE CONTACTED IN REFERENCE TO THIS APPLICATION:

Name and Title

E-Mail Address

Telephone (Area Code) Number

Fax Number

PRINCIPAL BUSINESS ADDRESS OF THE BUSINESS ENTITY:

STREET LOCATION

Number/Street

City

State

Zip Code

MAILING ADDRESS (if different)

Number/Street

City

State

Zip Code

COUNTRY TELEPHONE

Area Code

Number

Fax Number

WEBSITE (URL)

ADDRESS FROM WHICH THE BUSINESS ENTITY IS OR WILL BE CONDUCTING ANY BUSINESS, AS PART OF AN AGREEMENT WITH A CASINO HOTEL:

STREET LOCATION

Number/Street

City

State

Zip Code

COUNTRY TELEPHONE

Area Code

Number

Fax Number

☐ This form is being submitted as an initial application for a casino license.

☐ **Casino I Establishment:** A hotel providing a minimum of 300-1,499 qualifying sleeping units, a minimum area of 10,000 square feet of qualifying indoor public space, a casino room with a minimum area of 10,000 square feet and a convention, banquet center that would accommodate a minimum of 1,500 persons.

☐ **Casino II Establishment:** A hotel providing a minimum of 200-299 qualifying sleeping units, a minimum area of 7,000 square feet of qualifying indoor public space, banquet facilities that would accommodate a minimum of 500 persons, and an on-site casino room with a minimum area of 7,000 square feet or a freestanding off-site casino room with a maximum of 7,000 square feet to be located in the historical district of the town closest to which the hotel is located, in space already established and in conformity with rules and regulations promulgated by the Historic Preservation Commission on St. Croix no improvements, additions, or alterations are to be made to the external structure of the freestanding off-site casino that result in change to the architectural aesthetics of the building or the town.

☐ **Casino III Establishment:** A hotel providing a minimum of 150-199 qualifying sleeping units, a minimum area of 2,000 square feet of qualifying indoor public space, a casino room with a minimum area of 5,000 square feet and banquet facilities that would accommodate a minimum of 500 persons.

☐ This form is being submitted as an application for the retention of a casino license.

☐ The above-named business entity is an applicant for a statement of compliance.

INITIALS _____ DATE: _____

☐ The above-named business entity holds shares in _____
which is an applicant for a casino license or statement of compliance

☐ Other. Explain: _____

ITEM 1. INCORPORATION OR FORMATION

A. Provide the date and place of incorporation or formation:

Date

Place of Incorporation or formation

B. Incorporators or founding persons, use Attachment 1B to provide the following information for each incorporator or founding person of the business entity:

NAME	LAST KNOWN ADDRESS	OCCUPATION(S)	DATE OF BIRTH
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ITEM 2. OTHER NAMES AND ADDRESSES OF THE BUSINESS ENTITY

A. List all other names under which the business entity has done business and give the approximate time periods during which these names were being used:

B. Use Attachment 2B to provide the following information about all other addresses presently used by the business entity and all addresses from which the business entity is presently doing business:

NUMBER AND STREET	CITY	STATE	ZIP CODE
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C. Use Attachment 2C to provide the following information on all addresses, other than those listed in Item 2B, which the business entity held, or from which it was conducting business during the last 10 year period, and give the approximate time periods during which such addresses were held:

NUMBER AND STREET	CITY	STATE	ZIP CODE	DATES	
				FROM	TO

ITEM 3. DESCRIPTION OF PRESENT BUSINESS

Provide as Attachment 3, a description of the business done and intended to be done by the business entity and its parent, holding, subsidiary and intermediary companies or business entities and the general development of such business during the past five years, or such shorter period as the business entity or its parent, subsidiary and intermediary companies or business entities may have been engaged in business. The description shall include information on matters such as the following:

INITIALS _____ DATE: _____

- A. Competitive conditions in the industry or industries involved and the competitive position of the business entity, if known.
- B. The principal products produced and services rendered by the business entity and its parent, intermediary and subsidiary companies, the principal markets for said products or services and the methods of distribution.
- C. The sources and availability of raw materials essential to the business of the entity.
- D. The importance to the business and the duration and effect of, all material patents, trademarks, licenses, franchises, and concessions held.
- E. In describing developments, provide information such as the following: the nature and results of any bankruptcy, receivership or similar proceedings with respect to the business entity or its parent, intermediary or subsidiary companies; the nature and results of any other material reorganization, readjustment or succession of the business entity or any of its subsidiaries; the acquisition or disposition of any material amount of assets otherwise than in the ordinary course of business; and any material changes in the mode of conducting the business.

ITEM 4. DESCRIPTION OF FORMER BUSINESS

Provide as **Attachment 4**, a description of any former business, not listed in response to Item 3, which the business entity or any parent, intermediary or subsidiary company engaged in during the last 10 year period and the reasons for the cessation of such business. Also indicate the approximate time period during which each such business was conducted.

INITIALS _____ DATE: _____

ITEM 5. DIRECTORS AND TRUSTEES

Use **Attachment 5** to provide the following information for each director and trustee, or person with similar authority, of the business entity. (NOTE: Each director and trustee of the business entity must complete a Multi-jurisdictional Personal History Disclosure Form that is to be filed with this application.)

NAME AND HOME ADDRESS	BUSINESS ADDRESS	DATES DIRECTORSHIP OR TRUSTEESHIP HELD		OCCUPATION OR TITLE, POSITION OR ASSOCIATION WITH THE BUSINESS ENTITY	DATE OF BIRTH
		FROM	TO		

ITEM 6. FORMER DIRECTORS

Use **Attachment 6** to provide the following information for each person, not listed in response to Item 5, who held the position of director or trustee, or person with similar authority, of the business entity during the last 10 years.

NAME AND HOME ADDRESS	OCCUPATION AND BUSINESS ADDRESS	DATES DIRECTORSHIP OR TRUSTEESHIP HELD		DATE OF BIRTH	REASON FOR LEAVING
		FROM	TO		

ITEM 7. OFFICERS

Use **Attachment 7** to provide the following information for each officer of the business entity. Officers include all persons serving as president, secretary, treasurer, chairman of the board, vice-president, general/corporate counsel or any such other officers as may be prescribed by the formation documents. (Note: A Multi-jurisdictional Personal History Disclosure Form must be completed by every person noted below. In addition, the Commission may, in its discretion, order additional persons associated with the business entity to file such a form if it appears that such persons should be qualified in order to effectuate the purposes of the Casino Control Act.)

NAME AND HOME ADDRESS	TITLE	DATES OFFICE HELD		BUSINESS ADDRESS	DATE OF BIRTH
		FROM	TO		

INITIALS _____ DATE: _____

ITEM 8. FORMER OFFICERS

Use **Attachment 8** to provide the following information for each person, not listed in response to Item 7, who was an officer of the business entity during the last 10 year period. Officers include all persons serving as president, secretary, treasurer, chairman of the board, vice-president or any such other offices as may be prescribed by the formation documents.

NAME AND LAST KNOWN HOME ADDRESS	OFFICE HELD	DATES OFFICE HELD		PRESENT OCCUPATION AND BUSINESS ADDRESS	DATE OF BIRTH
		FROM	TO		

ITEM 9. COMPENSATION OF OFFICERS AND DIRECTORS

Use **Attachment 9** to provide the following information regarding the amount of total annual compensation received during the last calendar year and the amount to be received during the subsequent calendar year by each director, trustee, and officer, of the business entity, whether such compensation is in the form of salary, wages, commissions, fees, securities or other ownership interest, bonuses or otherwise.

NAME	COMPENSATION LAST CALENDAR YEAR	COMPENSATION SUBSEQUENT CALENDAR YEAR	FORM OF COMPENSATION
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ITEM 10. COMPENSATION OVER \$100,000

Use **Attachment 10** to provide the following information for each person, other than those listed in response to Item 9, who currently receives, or who reasonably can be expected to receive within one calendar year from the date of this form, **compensation as described in Item 9** that exceeds \$100,000 per year.

NAME	DATE OF BIRTH	BUSINESS ADDRESS	POSITION AND LENGTH OF TIME EMPLOYED WITH THE BUSINESS ENTITY	AMOUNT OF COMPENSATION
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INITIALS _____ DATE: _____

ITEM 11. BONUS, PROFIT SHARING, PENSION, RETIREMENT, DEFERRED COMPENSATION AND SIMILAR PLANS

Provide as **Attachment 11**, a description of all bonus, profit sharing, pension, retirement, deferred compensation and similar plans in existence or to be created by the business entity. This description shall include, but not be limited to:

1. the title or name of the plan;
2. the identity and address of the trustee of the plan or the person administering the plan;
3. the material features of the plan;
4. the methods of financing the plan;
5. the identity of each class of person who is or will participant in the plan;
6. the approximate number of persons in each such class; and
7. the amounts distributed under the plan to each class of persons during the last fiscal year, if the plan was in effect during that time.

ITEM 12. SECURITY OR OTHER OWNERSHIP INTEREST DESCRIPTION

Describe the nature, type, number of authorized and issued shares, terms, conditions, rights and privileges of all classes of voting, nonvoting and security or other ownership interest issued, or to be issued, by the business entity, including the number of shares of each class of security or other ownership interest authorized or to be authorized and the number of shares of each class of security or other ownership interest outstanding (i.e., not held by or on behalf of the issuer) as of this date.

If the right of holders of any class of security or other ownership interest may be modified otherwise than by a vote of a majority or more of the outstanding shares so affected, voting as a class, so state and explain briefly:

INITIALS _____ DATE: _____

ITEM 13. VOTING SHAREHOLDERS

Use **Attachment 13** to provide the following information for each person or entity holding of record or having a beneficial interest in any voting securities or other ownership interest issued by the business entity. This information must be provided as of a date no more than 60 days prior to the date of this application. (Note: If the business entity submitting this form is an applicant for a casino license, or is a nonpublic holding or intermediary company of such an applicant, then a completed Multi-jurisdictional Personal History Disclosure Form or Business Entity Disclosure Form, as the case may be, must be filed for each person or entity holding or having a beneficial interest in the voting securities or other ownership interest of the business entity. If the business entity submitting this form is a publicly-traded holding company of an applicant for a casino license, then a completed Multi-jurisdictional Personal History Disclosure Form or Business Entity Disclosure Form, as the case may be, must be filed for each person or entity holding or having a beneficial interest in the voting securities or other ownership interest of the business entity unless the Commission has granted a waiver of the qualification requirement as to such persons or entity).

NAME AND HOME ADDRESS	DATE OF BIRTH	CLASS OF VOTING SECURITIES OR OTHER OWNERSHIP INTEREST HELD	NUMBER OF SHARES HELD	% OF OUTSTANDING VOTING SECURITIES OR OTHER OWNERSHIP INTEREST HELD
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ITEM 14. NON-VOTING SHAREHOLDERS

Use **Attachment 14** to provide the following information for each person or entity holding of record or having a beneficial interest in any nonvoting securities or other ownership interest issued by the business entity. This information must be provided as of a date no more than 60 days prior to the date of this application. (Note: If the business entity submitting this form is an applicant for a casino license, or is a nonpublic holding or intermediary company of such an applicant, then a completed Multi-jurisdictional Personal History Disclosure Form or Business Entity Disclosure Form, as the case may be, must be filed for each person or entity holding or having a beneficial interest in the nonvoting securities or other ownership interest of the business entity. If the business entity submitting this form is a publicly-traded holding company of an applicant for a casino license, then a completed Multi-jurisdictional Personal History Disclosure Form or Business Entity Disclosure Form, as the case may be, must be filed for each person or entity holding or having a beneficial interest in the nonvoting securities or other ownership interest of the business entity, unless the Commission has granted a waiver of the qualification requirement as to such persons or entity).

NAME AND HOME ADDRESS	DATE OF BIRTH	CLASS OF NONVOTING SECURITIES OR OTHER OWNERSHIP INTEREST HELD	NUMBER OF SHARES HELD	% OF OUTSTANDING NONVOTING SECURITIES OR OTHER OWNERSHIP INTEREST HELD
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INITIALS _____ DATE: _____

ITEM 15. DESCRIPTION OF LONG TERM DEBT

Provide as **Attachment 15**, a description of the nature, type, terms, covenants, conditions and priorities of all outstanding bonds, loans, mortgages, trust deeds, notes, debentures, or other forms of indebtedness issued or executed (including loans made by shareholders, or to be issued or executed by the business entity, which mature more than one year from the date of issuance or which, by their terms, are renewable for a period of more than one year from the date of issuance (or, in the space below, provide a specific cross-reference to the applicable document(s) filed with this application that contain(s) all of the requested information.

ITEM 16. HOLDERS OF LONG TERM DEBT

Use **Attachment 16** to provide the following information for each person or entity holding any outstanding bonds, loans, mortgages, trust deeds, notes, debentures, or other forms of indebtedness executed or issued by the business entity, which mature more than one year from the date of issuance or which, by their terms, are renewable for a period of more than one year from the date of issuance. (Note: Some or all of the persons or entities listed below may be required by the Commission to submit a completed Multi-jurisdictional Personal History Disclosure Form or Business Entity Disclosure Form, as the case may be.)

NAME AND ADDRESS	DATE OF BIRTH	TYPE AND CLASS OF DEBT INSTRUMENT HELD	DOLLAR AMOUNT OF DEBT HELD (Both Original Amount and Current Balance)
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ITEM 17. OTHER INDEBTEDNESS AND SECURITY DEVICES

Provide as **Attachment 17**, a description of the nature, type, terms, conditions and covenants of all outstanding loans, mortgages, trust deeds, pledges, lines of credit, or other evidence of indebtedness or security devices utilized by the business entity other than those described in response to Items 15 and 16 (or, in the space below, provide a specific cross-reference to the applicable document(s) filed with this application that contain(s) all of the requested information).

ITEM 18. HOLDERS OF OTHER INDEBTEDNESS

Use **Attachment 18** to provide the following information with respect to each holder of any outstanding loan, mortgage, trust deed, pledge or other evidence of indebtedness or security device described in response to Item 17. (Note: Some or all of the persons listed in response to this item may be required by the Commission to submit a completed Multi-jurisdictional Personal History Disclosure Form or Business Entity Disclosure Form, as the case may be).

NAME AND ADDRESS	DATE OF BIRTH	TYPE OF DEBT INSTRUMENT HELD	DOLLAR AMOUNT OF DEBT HELD (Both Original Amount and Current Balance)
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INITIALS _____ DATE: _____

ITEM 19. SECURITIES OPTIONS

A. Provide as **Attachment 19A**, a detailed description of any options existing or to be created with respect to securities issued by the business entity, which description shall include, but not be limited to, the title and amount of securities subject to option, the year or years during which the options were or will be granted, the conditions under which the options were or will be granted, the consideration for granting the option and the year or years during which, and the terms under which, optionees became or will become, entitled to exercise the options, and when such options expire (or include as Attachment 19A copies of any outstanding option plans or proxy statements that provide the requested information). (Note: For the purpose of this application, option shall mean right, warrant or option to subscribe to or purchase any securities issued by the business entity).

B. Use **Attachment 19B** to provide the following information regarding all persons holding the options described in Item 19A.

NAME	BENEFICIAL OWNER'S ADDRESS	OPTIONS HELD	MARKET VALUE (AT ISSUANCE)
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ITEM 20. FINANCIAL INSTITUTIONS

Use **Attachment 20** to provide the following information with respect to each bank, savings and loan association or other financial institution, whether domestic or foreign, in which the business entity has or has had an account over the last 10 year period, regardless of whether such account was held in the name of the business entity, a nominee of the business entity or was otherwise under the direct or indirect control of the business entity.

NAME AND ADDRESS	TYPE OF ACCOUNT(S)	ACCOUNT NUMBER(S)	TIME PERIOD ACCOUNT HELD	
			FROM	TO

ITEM 21. CONTRACTS AND SUPPLIERS

Use **Attachment 21** to provide the following information with respect to all persons with whom the business entity has contracts or agreements of \$100,000 or more in value or from whom the business entity has received \$100,000 or more in goods or services in the past six months.

Employment contracts need only be listed if, by their terms, they exceed one year in duration.

NAME	ADDRESS	NATURE OF CONTRACT OR GOODS OR SERVICES SUPPLIED
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INITIALS _____ DATE: _____

ITEM 22. SECURITIES OR OTHER OWNERSHIP INTEREST HELD BY THE BUSINESS ENTITY

Use **Attachment 22** to provide the following information about each company in which the business entity holds shares or an interest.

NAME AND ADDRESS OF COMPANY	TYPE OF SECURITIES OR OTHER OWNERSHIP INTEREST HELD	PURCHASE PRICE PER SHARE OR INTEREST	NUMBER OF SHARES HELD	% OF OWNERSHIP MORE THAN 5%
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ITEM 23. INSIDER TRANSACTIONS

Use **Attachment 23** to provide the following information for each change that occurred within the last five years preceding this application in the beneficial ownership of a business entity on the part of any person who is indirectly or directly a beneficial owner of 10 percent or more of any class of securities or other ownership interest in the business entity or who is or was within that period a director or officer of the business entity. (Include changes resulting from (a) gift; (b) purchase; (c) sale; (d) exercise of an option to purchase; (e) exercise of an option to sell; (f) grant or receipt of a put; or (g) grant or receipt of a call).

DATE OF TRANSACTION	NATURE OF TRANSACTION	PARTIES TO TRANSACTION (INCLUDE POSITIONS)	NAMES OF SECURITIES INVOLVED
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INITIALS _____ DATE: _____

ITEM 24. CRIMINAL HISTORY

The next question asks about any charges or offenses the business entity or any of its directors, trustees or officers may have committed or had filed against them. Prior to answering this question, carefully review the definitions and instructions that follow.

Definitions for purposes of this question:

- A. "Charge" includes any indictment, complaint, information, summons, or other notice of the alleged commission of any "offense."
- B. "Offense" includes all felonies, crimes, high misdemeanors, disorderly persons offenses, and petty disorderly persons offenses.

Instructions:

- 1. Answer "Yes" and provide all information, to the best of your ability, EVEN IF:
 - A. The business entity, its directors, trustees, or officers did not commit the offense charged;
 - B. The charges were dismissed;
 - C. The business entity, its directors, trustees, or officers were not convicted; or
 - D. The charges or offenses happened a long time ago.
- 2. Answer "No" if the records relating to the charges have been expunged or sealed by court order.

Has the business entity or any of its subsidiaries, directors, trustees, or officers ever been indicted, charged with or convicted of a criminal or disorderly person's offense or been a party to or named as an unindicted co-conspirator in any criminal proceeding in this state or any other jurisdiction? ☐ Yes ☐ No

If yes, use **Attachment 24** to provide the following information for each indictment, charge or conviction:

NAME OF CASE AND DOCKET NUMBER	NATURE OF CHARGE OR COMPLAINT	DATE OF CHARGE OR COMPLAINT	NAME AND ADDRESS OF LAW ENFORCEMENT AGENCY OR COURT INVOLVED	DISPOSITION (ACQUITTED, CONVICTED, DISMISSED, ETC.)	SENTENCE
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INITIALS _____ DATE: _____

ITEM 25. TESTIMONY, INVESTIGATIONS OR POLYGRAPHS

Has the business entity, any of its subsidiaries, directors, trustees or officers ever refused to testify before, been the subject of an investigation conducted by, or requested to take a polygraph exam by, any governmental agency, court, committee, grand jury or investigatory body (municipal, state, county, province, federal, national, etc.), other than in response to minor traffic-related offenses? ☐ Yes ☐ No

If yes, use **Attachment 25** to provide the following information about any such testimony, investigation or polygraph exam:

NAME AND ADDRESS OF COURT OR OTHER AGENCY	NATURE OF PROCEEDINGS OR INVESTIGATION	WAS TESTIMONY GIVEN?	DATE ON WHICH TESTIMONY WAS GIVEN	APPROXIMATE TIME PERIOD OF INVESTIGATION
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ITEM 26. TESTIMONY, INVESTIGATIONS OR POLYGRAPHS REFUSALS

Has the business entity, any of its subsidiaries, directors, trustees or officers ever refused to testify before, to answer a question asked by, or to take a polygraph exam administered by any governmental agency, court, committee, grand jury or investigatory body (municipal, state, county, province, federal, national, etc.)? ☐ Yes ☐ No

If yes, use **Attachment 26** to provide the following information about any such testimony, investigation or polygraph refusal:

NAME AND ADDRESS OF COURT OR OTHER AGENCY	NATURE OF PROCEEDINGS OR INVESTIGATION	DATE OF PROCEEDINGS / INVESTIGATION	CIVIL OR CRIMINAL CONTEMPT CITATION? (SPECIFY)	DISPOSITION OF CONTEMPT CITATION
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ITEM 27. EXISTING LITIGATION

Provide as **Attachment 27**, a description of all existing civil litigation to which the business entity, its parent or any subsidiary, is presently a party, whether in this state or in another jurisdiction. Do not include any litigation in which the damages may not reasonably be expected to exceed \$100,000, or litigation in which damages may be expected to exceed \$100,000, but which involve claims against the business entity which are fully and completely covered under an insurance policy held by the business entity with a licensed insurance carrier. This description must include the title and docket number of the litigation, the name and location of the court before which it is pending, the identity of all parties to the litigation, and the general nature of all claims being made.

INITIALS _____ DATE: _____

ITEM 28. ANTITRUST, TRADE REGULATION AND SECURITIES JUDGMENTS; STATUTORY AND REGULATORY VIOLATIONS

- A. Has the business entity ever had a judgment, order, consent decree or consent order, pertaining to a violation or alleged violation of the federal antitrust, trade regulation or securities laws, or similar laws of any state, province or country entered against it?
☐ Yes ☐ No
- B. In the past 10 years, has the business entity had a judgment, order, consent decree or consent order, pertaining to a violation or alleged violation of any state or federal statute, regulation or code that resulted in a fine or penalty of \$50,000 or more, entered against it?
☐ Yes ☐ No

If yes to either question, use **Attachment 28** to provide the following information for each judgment, order, consent decree or consent order:

DATE OF OFFENSE	NATURE OF OFFENSE	TITLE OF CASE AND DOCKET NUMBER	NAME AND ADDRESS OF COURT OR AGENCY	NATURE OF JUDGMENT, DECREE OR ORDER	DATE ENTERED
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ITEM 29. BANKRUPTCY OR INSOLVENCY PROCEEDINGS AND APPOINTED RECEIVER, AGENT OR TRUSTEE

Has the business entity, its parent or any intermediary company, had any petition under any provision of the Federal Bankruptcy Code or under any state insolvency law, filed by or against it in the last 10-year period? ☐ Yes ☐ No

- A. Has the business entity, its parent or any intermediary company, sought relief under any provision of the Federal Bankruptcy Code or under any state insolvency law in the last 10-year period? ☐ Yes ☐ No

If yes to either question, use **Attachment 29A** to provide the following information for each bankruptcy or insolvency proceeding:

DATE PETITION FILED OR RELIEF SOUGHT	TITLE OF CASE AND DOCKET NUMBER	NAME AND ADDRESS OF COURT OR AGENCY	NATURE OF JUDGMENT OR RELIEF	DATE ENTERED
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INITIALS _____ DATE: _____

ITEM 29. BANKRUPTCY OR INSOLVENCY PROCEEDINGS AND APPOINTED RECEIVER, AGENT OR TRUSTEE (Continued)

- B. Has any receiver, fiscal agent, trustee, reorganization trustee or similar officer, been appointed in the last 10-year period by a court for the business or property of the business entity or its parent, holding, intermediary or subsidiary companies? ☐ Yes ☐ No

If yes to any of the above questions, use **Attachment 29C** to provide the following information for each proceeding:

NAME OF PERSON APPOINTED	DATE APPOINTED	COURT	REASON FOR APPOINTMENT
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ITEM 30. LICENSES

- A. During the last 10-year period, has the business entity, its parent or any subsidiary, ever had any license or certificate issued by a government agency in this state or any other jurisdiction, denied, suspended or revoked? ☐ Yes ☐ No

If yes, use **Attachment 30A** to provide the following information for each license or certificate denied, suspended or revoked:

TYPE OF LICENSE OR CERTIFICATE	NAME AND LOCATION OF GOVERNMENTAL AGENCY	ACTION TAKEN	DATE	REASON FOR ACTION TAKEN
--------------------------------	--	--------------	------	-------------------------

- B. Has the business entity, its parent or any subsidiary, ever applied in any jurisdiction for a license, permit, or other authorization, to participate in lawful gambling operations (including casino gaming, horse racing, dog racing, pari-mutuel operation, lottery, sports betting, etc.)? ☐ Yes ☐ No

If yes, use **Attachment 30B** to provide the following information for each license, permit or other authorization applied for:

NAME AND ADDRESS OF LICENSING AGENCY	DATE OF APPLICATION	DISPOSITION (GRANTED, DENIED, PENDING)	TYPE OF GAMBLING ACTIVITY	IF ISSUED, GIVE APPROPRIATE LICENSE, PERMIT, OR OTHER SUCH NUMBER, AND THE EXPIRATION DATE
--------------------------------------	---------------------	---	---------------------------	---

INITIALS _____ DATE: _____

ITEM 31. CONTRIBUTIONS AND DISBURSEMENTS OF BUSINESS ENTITY

- A. During the last 10-year period, has the business entity, its parent or any subsidiary, director, officer or employee, or any third party acting for or on behalf of the business entity, made any bribes or kickbacks or made any payments alleged to have been bribes or kickbacks to any employee, company or organization to obtain favorable treatment?
☐ Yes ☐ No
- B. During the last 10-year period, has the business entity, its parent or any subsidiary, director, officer or employee, or any third party acting for or on behalf of the business entity, made any bribes or kickbacks or made any payments alleged to have been bribes or kickbacks to any government official, domestic or foreign, to obtain favorable treatment?
☐ Yes ☐ No
- C. During the last 10-year period, has the business entity, its parent, any subsidiary or related entity or individual, donated or loaned funds, for the purpose of opposing or supporting any government, political party, candidate or committee, either domestic or foreign?
☐ Yes ☐ No
- D. During the last 10-year period, has the business entity, its parent company, any subsidiary or related entity or individual, donated or loaned property or any other thing of value, for the purpose of opposing or supporting any government, political party, candidate or committee, either domestic or foreign?
☐ Yes ☐ No
- E. During the last 10-year period, did the business entity, its parent or any subsidiary, make any loans, donations or other disbursements, to directors, officers or employees, for the purpose of making political contributions, either domestic or foreign?
☐ Yes ☐ No
- F. During the last 10-year period, has the business entity, its parent or any subsidiary, make any loans, donations or other disbursements, to directors, officers or employees, for the purpose of reimbursing such individuals for political contributions, either domestic or foreign?
☐ Yes ☐ No
- G. During the last 10-year period, has the business entity, its parent or any subsidiary, maintained any bank account, domestic or foreign, not reflected on the business entity's books or records?
☐ Yes ☐ No
- H. During the last 10-year period, has the business entity, its parent or any subsidiary, maintained any numbered account or any account, in the name of a nominee for the business entity?
☐ Yes ☐ No
- I. List the names and addresses of any present or former directors, officers, employees, or third parties, who would have knowledge or information concerning the questions affirmatively answered under this item:

INITIALS _____ DATE: _____

ITEM 32. FINANCIAL STATEMENTS

- A. Provide as **Attachment 32A**, an audited financial statement which shall include but not be limited to, an income statement, balance sheet, statement of sources, and application of funds and all notes to such statements and related financial schedules, for the last fiscal year prepared in accordance with the Securities Act of 1933, the Securities Exchange Act of 1934, the Public Utility Holding Company Act of 1935, and the Investment Company Act of 1940.
- B. Provide as **Attachment 32B**, copies of all financial statements prepared in the last five years, with respect to the business entity and any exceptions taken to such statements by the independent auditor retained by the business entity and the management response thereto.

ITEM 33. ANNUAL REPORTS

- A. Provide as **Attachment 33A**, a copy of all annual reports of the business entity that were submitted to shareholders or other persons during the last five years.
- B. In addition to the information required in Item 33A, a business entity that is a registrant under the Securities Act of 1933 or the Securities Exchange Act of 1934, is to submit a copy of all annual reports prepared on Form 10K, pursuant to Sections 13 or 15(d) of the Securities Exchange Act of 1934 and filed within the last five years. Identify these as **Attachment 33B**.

ITEM 34. QUARTERLY REPORTS

Provide as **Attachment 34**, a copy of the last quarterly, unaudited financial statements prepared by or for the business entity. If the business entity is a registrant with the Securities and Exchange Commission (SEC), a copy of the Form 10Q last filed with the SEC may be provided in response to this item.

ITEM 35. INTERIM REPORTS

Provide as **Attachment 35**, a copy of any current report prepared due to the occurrence of any of the following events: change in control of the business entity; acquisition or disposition of assets; bankruptcy or receivership proceedings; changes in the business entity's certifying accountant or other material events. If the business entity is a registrant with the SEC, a copy of the most recent Form 8K filed with the SEC may be provided in response to this item.

ITEM 36. PROXY AND INFORMATION STATEMENT

Provide as **Attachment 36**, a copy of the last definitive Proxy or Information Statement filed pursuant to Section 14 of the Securities Exchange Act of 1934.

ITEM 37. REGISTRATION STATEMENT

Provide as **Attachment 37**, a copy of all Registration Statements filed in the last five years pursuant to the Securities Act of 1933.

ITEM 38. REPORTS OF ACCOUNTANTS

Provide as **Attachment 38**, a copy of all reports and correspondence, other than those previously included in this application, submitted in the last five years by independent auditors for the business entity which pertain to the issuance of financial statements, managerial advisory services, or internal control recommendations. Include the name, address and telephone number of the current outside auditor(s).

ITEM 39. FORMATION DOCUMENTS

Provide as **Attachment 39**, a certified copy of the Articles of Incorporation, Charter and Bylaws of the corporation, the partnership agreement of the partnership, or formation documents of the business entity, as applicable, with all amendments and proposed amendments to date. Highlight the portions of these documents that comply with the requirements of the Virgin Islands Casino and Resort Control Act of 1995.

ITEM 40. ORGANIZATIONAL CHART

- A. Provide as **Attachment 40A**, a current ownership organizational chart of the business entity, its parent company and each subsidiary of the business entity.
- B. Provide as **Attachment 40B**, a functional Table of Organization for the business entity filing this Business Entity Disclosure Form, including position descriptions and the names of persons holding such positions.

ITEM 41. TAX RETURNS

Provide as **Attachment 41**, a copy of all 1120 Forms (U.S. Corporate Income Tax Return), 1065 (Partnership Tax Return Limited Liability Company Return) and 941 Forms (Employer's Quarterly Federal Tax Return) as applicable, submitted to the Internal Revenue Service in the last five years.

INITIALS _____ DATE: _____

ITEM 42. BUSINESS ENTITY DISCLOSURE FORM – ATTACHMENTS

On the following chart, indicate with a checkmark which attachments are included with this application. If an attachment is not applicable, indicate N/A. Please note that attachment numbers with an asterisk (*) are attachments you are to provide or create and do not contain corresponding charts.

Attachment Number	Attachment Description	V if attached N/A if not attached
1B	Incorporators or founding persons	
2B	Other names and addresses of the business entity (presently used)	
2C	Other names and addresses of the business entity (past 10 years)	
3*	Description of business done and intended to be done	
4*	Description of any former business engaged in during the last 10 years and the reason for the cessation of the business	
5	Directors and trustees	
6	Former directors and trustees	
7	Officers	
8	Former officers	
9	Compensation of officers and directors	
10	Compensation over \$100,000	
11*	Description of all bonus, profit sharing, pension, retirement, deferred compensation, and similar plans	
13	Voting shareholders	
14	Nonvoting shareholders	
15*	Description of long-term debt	
16	Holders of long-term debt	
17*	Other indebtedness and security devices	
18	Holders of other indebtedness	
19A*	Securities options – description	
19B	Persons holding securities options	
20	Financial institutions	
21	Contracts and suppliers	
22	Securities or other ownership interest held by the business entity	
23	Insider transactions	
24	Criminal history	
25	Testimony, investigations or polygraphs	
26	Testimony, investigations or polygraph refusals	
27	Existing litigation	
28	Antitrust, trade regulations and securities judgments, statutory and regulatory violations	
29A	Bankruptcy or insolvency proceedings and appointed receiver, agent or trustee (bankruptcy or insolvency)	
29C	Bankruptcy or insolvency proceedings and appointed receiver, agent or trustee (appointed receiver, agent or trustee)	
30A	Licenses (Government)	
30B	Licenses (other gambling)	
32A*	Audited financial statements for the last fiscal year	
32B*	Financial statements for the last five years	
33A*	Annual reports for the last five years	
33B*	Annual reports prepared on the SEC's Form 10K for the last five years	
34*	A copy of the last quarterly unaudited financial statement	
35*	Copy(ies) of any interim reports	
36*	A copy of the last definitive proxy or information statement (SEC)	
37*	A copy of all registration statements for the last five years filed in accordance with the Securities Act of 1933	
38*	Copies of all other reports prepared in the last five years by independent auditors of the business entity	
39*	Formation documents and all amendments and proposed amendments	
40A*	Current ownership table of organization	
40B*	Functional table of organization for business entity filing this form, job descriptions and names of employees	
41*	Copies of forms filed with the IRS in the last five years	

INITIALS _____ DATE: _____

ITEM 43. AFFIDAVITS AND SIGNATURES

Pursuant to the regulations of the Virgin Islands Casino Control Commission, this form must be sworn to or affirmed, signed and dated, before a person legally competent to take an oath or affirmation, who shall himself date the signature of the affiant and indicate the basis of his authority to take oaths and affirmations.

The documents on pages 20 through 23 are to be signed in accordance with these regulations. The documents are:

- ☐ AFFIDAVIT
- ☐ RELEASE AUTHORIZATION
- ☐ CONSENT TO INSPECTIONS, SEARCHES AND SEIZURES
- ☐ WAIVER OF LIABILITY

The President or any officer of the business entity authorized to affirm may complete the affidavit. The remaining documents are to be signed by the President or Chief Executive Officer.

INITIALS _____ DATE: _____

STATEMENT OF TRUTH

STATE OF _____)
COUNTY OF _____)

SS:

I, _____, the _____
NAME TITLE/POSITION

of the business entity, being duly sworn according to law, on my oath, deposes and says that I make this statement on behalf of the business entity, and that the above statements are true and correct to the best of my knowledge and belief, and that this statement is executed with the knowledge that any misrepresentation or failure to reveal information may be deemed sufficient cause for the refusal to issue, or the revocation of, a license. Further, that I am voluntarily submitting this statement and understand that misleading statements may subject me to criminal or other sanctions or punishment.

Name of Business Entity

Signature

Date

Title

Accountant Preparing Form, if any

Subscribed and sworn to before me this _____ day of _____, 20 _____.

NOTARY PUBLIC

Attorney Preparing Form, if any

Commission Expiration Date

Notary License Number

SEAL

INITIALS _____ DATE: _____

RELEASE AUTHORIZATION

TO: All Courts, Probation Departments, Selective Service Boards, Employers, Educational Institutions, Banks, Financial and other such Institutions and all Governmental Agencies - Federal, State and local, without exception, both foreign and domestic

On behalf of _____,
NAME OF BUSINESS ENTITY

I, _____, have authorized
NAME OF PRESIDENT OR CHIEF EXECUTIVE OFFICER

the Virgin Islands Casino Control Commission to conduct a full investigation into the background of said business entity.

Therefore, you are hereby authorized to release any and all information pertaining to the said business entity, documentary or otherwise, as requested by any employee, agent or representative of the Virgin Islands Casino Control Commission, provided that he or she certifies to you that said business entity has an application pending before Virgin Islands Casino Control Commission or Division of Gaming Enforcement or that said business entity is presently a licensee or registrant required to be qualified under the provisions of the Casino Control Act.

This authorization shall supersede and countermand any prior request or authorization to the contrary.

A photocopy of this authorization will be considered as effective and valid as the original.

Signature

Date

Subscribed and sworn to before me this ____ day of _____, 20____.

NOTARY PUBLIC

Commission Expiration Date

Notary License Number

SEAL

INITIALS _____ DATE: _____

CONSENT TO INSPECTIONS, SEARCHES AND SEIZURES

On behalf of _____
NAME OF BUSINESS ENTITY

I, _____, hereby consent to
NAME OF PRESIDENT OR CHIEF EXECUTIVE OFFICER

all inspections, searches and seizures and the supplying of handwriting exemplars as authorized by
the Casino Control Act and by the rules and regulations of the Virgin Islands Casino Control
Commission.

The said business is aware of its right, secured by the Constitution of the United States, and by
the Revised Organic Act of 1954, and the Virgin Islands Code not to consent to such inspections,
searches and seizures and I expressly waive and forego that right on behalf of said business entity.

Signature

Date

Subscribed and sworn to before me this _____ day of _____, 20_____.

NOTARY PUBLIC

Commission Expiration Date

Notary License Number

SEAL

INITIALS _____ DATE: _____

WAIVER OF LIABILITY

On behalf of _____
NAME OF BUSINESS ENTITY

I, _____, hereby waive liability
NAME OF PRESIDENT OR CHIEF EXECUTIVE OFFICER

as to the US Virgin Islands and its instrumentalities and agents, for any damages resulting to the said business entity from any disclosure or publication in any manner, other than a willfully, unlawful disclosure or publication, of any material or information acquired during the licensing process or during any inquiries, investigations or hearings.

Signature

Date

Subscribed and sworn to before me this _____ day of _____, 20_____.

NOTARY PUBLIC

Commission Expiration Date

Notary License Number

SEAL

INITIALS _____ DATE: _____

ATTACHMENT 1B

INCORPORATORS OR FOUNDING PERSONS[illegible]

Attachment 1B: Page _____ of _____ Pages

INITIALS _____ DATE: _____

OTHER NAMES AND ADDRESSES OF THE BUSINESS ENTITY (Presently Used)

[illegible]

INITIALS _____ DATE: _____

ATTACHMENT 2C

OTHER NAMES AND ADDRESSES OF THE BUSINESS ENTITY (Past 10 Years)

NAME	NUMBER AND STREET	CITY	STATE	ZIP CODE	DATES	
					FROM	TO

Attachment 2C: Page ____ of ____ Pages

INITIALS _____ DATE: _____

ATTACHMENT 3

DESCRIPTION OF PRESENT BUSINESS

INSERT NARRATIVE OR DOCUMENTS(S) HERE

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 3: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ITEM 4.

DESCRIPTION OF FORMER BUSINESS

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 4: Page _____ of _____ Pages

INITIALS _____ DATE: _____

DIRECTORS, TRUSTEES



INITIALS _____ DATE: _____

ATTACHMENT 6

FORMER DIRECTORS, TRUSTEES

NAME AND HOME ADDRESS	OCCUPATION AND BUSINESS ADDRESS	DATES DIRECTORSHIP OR TRUSTEESHIP HELD		DATE OF BIRTH	REASON FOR LEAVING
		FROM	TO		

Attachment 6: Page ____ of ____ Pages

INITIALS _____ DATE: _____

ATTACHMENT 7 OFFICERS

NAME AND HOME ADDRESS	TITLE	DATES OFFICE HELD		BUSINESS ADDRESS	DATE OF BIRTH
		FROM	TO		
		C	C		
		C	C		
		C	C		
		C	C		
		C	C		
		C	C		
		C	C		
		C	C		
		C	C		
		C	C		
		C	C		
		C	C		
		C	C		
		C	C		
		C	C		

Attachment 7: Page ____ of ____ Pages

INITIALS ____ DATE: ____

ATTACHMENT 8

FORMER OFFICERS

NAME AND LAST KNOWN HOME ADDRESS	OFFICE HELD	DATES OFFICE HELD		PRESENT OCCUPATION AND BUSINESS ADDRESS	DATE OF BIRTH
		FROM	TO		

Attachment 8: Page ____ of ____ Pages

INITIALS _____ DATE: _____

ATTACHMENT 9

COMPENSATION OF OFFICERS AND DIRECTORS

[illegible]

Attachment 9: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ATTACHMENT 10 COMPENSATION OVER \$100,000[illegible]

Attachment 10: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ITEM 11.

BONUS, PROFIT SHARING, PENSION, RETIREMENT, DEFERRED COMPENSATION AND SIMILAR PLANS

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 11: Page ____ of ____ Pages

INITIALS _____ DATE: _____

ATTACHMENT 13

VOTING SHAREHOLDERS

[illegible]

Attachment 13: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ATTACHMENT 14 NONVOTING SHAREHOLDERS[illegible]

Attachment 14: Page_____of_____Pages

INITIALS _____ DATE: _____

ITEM 15. DESCRIPTION OF LONG TERM DEBT

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 15: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ATTACHMENT 16

HOLDERS OF LONG TERM DEBT

[illegible]

Attachment 16: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ITEM 17.

OTHER INDEBTEDNESS AND SECURITY DEVICES

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 17: Page _____ of _____ Pages

INITIALS _____ DATE: _____

HOLDERS OF OTHER INDEBTEDNESS

[illegible]

Attachment 18: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ITEM 19A. SECURITIES OPTIONS

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 19A: Page ____ of ____ Pages

INITIALS _____ DATE: _____

PERSONS HOLDING SECURITIES OPTIONS

[illegible]

Attachment 19B: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ATTACHMENT 20 FINANCIAL INSTITUTIONS

NAME AND ADDRESS	TYPE OF ACCOUNT(S)	ACCOUNT NUMBER(S)	TIME PERIOD ACCOUNT HELD	
			FROM	TO

CONTRACTS AND SUPPLIERS

[illegible]

Attachment 21: Page _____ of _____ Pages

INITIALS _____ DATE: _____

SECURITIES OR OTHER OWNERSHIP INTEREST HELD BY THE BUSINESS ENTITYAttachment 22: Page _____ of _____ Pages

INITIALS _____ DATE: _____

INSIDER TRANSACTIONS

[illegible]

Attachment 23: Page_____of_____Pages

INITIALS _____ DATE: _____

ATTACHMENT 24

CRIMINAL HISTORY

[illegible]

Attachment 24: Page ____ of ____ Pages

INITIALS _____ DATE: _____

[illegible]

INITIALS _____ DATE: _____

TESTIMONY, INVESTIGATIONS OR POLYGRAPH REFUSALS

Attachment 26: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ATTACHMENT 27 EXISTING LITIGATION[illegible]

Attachment 27: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ANTITRUST, TRADE REGULATION AND SECURITIES JUDGMENTS; STATUTORY AND REGULATORY VIOLATIONS

[illegible]

INITIALS _____ DATE: _____

ATTACHMENT 29A

BANKRUPTCY OR INSOLVENCY PROCEEDINGS AND APPOINTED RECEIVER, AGENT OR TRUSTEE
(BANKRUPTCY OR INSOLVENCY)

DATE PETITION FILED OR RELIEF SOUGHT	TITLE OF CASE AND DOCKET NUMBER	NAME AND ADDRESS OF COURT OR AGENCY	NATURE OF JUDGMENT OR RELIEF	DATE ENTERED

Attachment 29A: Page ____ of ____ Pages

INITIALS ____ DATE: ____

ATTACHMENT 29C

BANKRUPTCY OR INSOLVENCY PROCEEDINGS AND APPOINTED RECEIVER, AGENT OR TRUSTEE
(APPOINTED RECEIVER, AGENT OR TRUSTEE)

[illegible]

Attachment 29C: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ATTACHMENT 30A

LICENSES (GOVERNMENT)

[illegible]

Attachment 30A: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ATTACHMENT 30B LICENSES (OTHER GAMBLING)

NAME AND ADDRESS OF LICENSING AGENCY	DATE OF APPLICATION	DISPOSITION (GRANTED, DENIED, PENDING)	TYPE OF GAMBLING ACTIVITY	IF ISSUED, GIVE APPROPRIATE LICENSE, PERMIT OR OTHER SUCH NUMBER AND EXPIRATION DATE

Attachment 30B: Page ____ of ____ Pages

INITIALS _____ DATE: _____

ITEM 32A. FINANCIAL STATEMENTS

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 32A: Page ____ of ____ Pages

INITIALS _____ DATE: _____

ITEM 32B.

FINANCIAL STATEMENTS

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 32B: Page ____ of ____ Pages

INITIALS _____ DATE: _____

ITEM 33A.

ANNUAL REPORTS

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 33A: Page ____ of ____ Pages

INITIALS _____ DATE: _____

ITEM 33B.

ANNUAL REPORTS

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 33B: Page ____ of ____ Pages

INITIALS _____ DATE: _____

ITEM 34.

QUARTERLY REPORTS

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 34: Page ____ of ____ Pages

INITIALS _____ DATE: _____

ITEM 35.

INTERIM REPORTS

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 35: Page ____ of ____ Pages

INITIALS ____ DATE: ____

ITEM 36.

PROXY AND INFORMATION STATEMENT

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 36: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ITEM 37.

REGISTRATION STATEMENT

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 37: Page ____ of ____ Pages

INITIALS _____ DATE: _____

ITEM 38.

REPORTS OF ACCOUNTANTS

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 38: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ITEM 39.

FORMATION DOCUMENTS

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 39: Page _____ of _____ Pages

INITIALS _____ DATE: _____

ITEM 40A. ORGANIZATIONAL CHART

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 40A: Page ____ of ____ Pages

INITIALS _____ DATE: _____

ITEM 40B.

ORGANIZATIONAL CHART

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 40B: Page ____ of ____ Pages

INITIALS _____ DATE: _____

ITEM 41.

TAX RETURNS

INSERT NARRATIVE OR DOCUMENT(S) HERE

Attachment 41: Page _____ of _____ Pages

INITIALS _____ DATE: _____

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