

****Before Moving Foreword Please Complete The Below Section****

1. Name of Associated Company: _____



Advance Deposit Wagering Business Entity Application

MGCB-9000

Maine Gambling Control Board

**Department of Public Safety
Maine Gambling Control Unit
87 State House Station
45 Commerce Drive, Suite 5
Augusta, Maine 04333-0087
(207) 626-3900 - Office
(207) 287-4356 - Fax**

NOTE: The MGCB - 9000 and 9200, along with all attachments, are submitted in an electronic format; i.e., thumb drive with each document being clearly labeled. For investigative efficiency, document dumps will not be accepted. For any required document not submitted with the application, provide an explanation and time frame for compliance.

APPLYING FOR YOUR Advance Deposit Wagering License

Applications can be obtained from: Maine Gambling Control Unit.

Items you must provide:

- Application forms (*completed & signed*)
- Supporting documentation as specified on 4. below “Attach the following information”
- Application Fee
- Copy of completed application in an electronic format; i.e., thumb drive or disc (CD)

Mail or deliver to: Department of Public Safety
Maine Gambling Control Unit
87 State House Station
45 Commerce Drive, Suite 5
Augusta, Maine 04333-0087
(207) 626-3900 – Office
(207) 287-4356 – Fax

Make check or money order payable to: Treasurer, State of Maine

ADVANCE DEPOSIT WAGERING LICENSES REQUIRED

1. In order to receive an advance deposit wagering license from the board, an applicant must meet the requirements of this section and the rules adopted by the board under section 1003, subsection 2, paragraph U and must be:
 - A. A commercial track;
 - B. An off-track betting facility licensed under section 275-D; or
 - C. An account wagering provider.
2. **Conditions of licensure.** An advance deposit wagering licensee shall:
 - A. Purchase a bond to secure the advance deposit wagering accounts;
 - B. Ensure that a person who establishes an account to place a wager on horse racing by means of advance deposit wagering has attained 18 years of age and is a resident of this State; and
 - C. Accept wagers on all live races being conducted in this State that are available for simulcast.
3. **Application fee.** The nonrefundable application fee for an advance deposit wagering license is \$1,000. In addition, the board may require an applicant to pay a one- time investigation fee in an amount limited to the cost to the board of processing the application and performing background investigations.

Instructions

1. APPLICATION FULLY COMPLETED IN BLUE INK

Type or clearly print an answer to every question. If a question does not apply to you, indicate so with an N/A. If you are unsure if a question applies to you or what information the form is asking you to provide, contact the Maine Gambling Control Unit office to seek clarification. If the available space is insufficient, continue on a separate sheet and precede each answer with the appropriate title and question number. The separate sheets are to be submitted as attachments and are not to be inserted between pages of the application.

2. ALL FORMS SIGNED & ATTACHED

The following accompanying forms must be signed and returned with the application:

Affirmation & Consent

Investigation Authorization/Authorization to Release Information

Applicant's Request to Release Information (*leave top two lines of the form blank*)

Provide Advance Deposit Wagering Personal History Disclosure applications MGCB-9200 for those individuals under section 1017 (1.).

3. ALL REQUESTED INFORMATION

The application, as well as other documents submitted to the Gambling Control Unit by or on behalf of the applicant for purposes of determining the qualifications of the applicant shall be sworn to or affirmed before a notary public in accordance with 8 M.R.S.A. §1017. If any form or document is signed by an attorney for the applicant, the signature shall certify that the attorney has read the forms or documents and that, to the best of his or her knowledge, information, and belief, based on diligent inquiry, the contents of the form or documents so supplied are true.

To the extent, if any, that the information in the application for a license or renewal or the supplemental information provided by the applicant becomes, outdated, inaccurate or incomplete, the applicant shall give the director written notice within 30 days that the information is outdated, inaccurate or incomplete, and shall at that time supply the information necessary to make the application or supplementary information current, accurate and complete.

The applicant shall cooperate fully with the Gambling Control Unit and any 3rd party contracted with the unit to complete any background investigation of the applicant. The applicant, upon request of the Gambling Control Unit, shall make any and all of its books and records available for inspection.

AFFIRMATION & CONSENT

I, _____, as authorized agent of the Applicant, state the following:

- A. That the statements made in the application and any documents made a part of the application are true and correct:
- B. That the applicant understands that the information provided on application forms required by the Maine Gambling Control Unit is used by the Unit, 3rd party contractor, along with other information, in judging the applicant's suitability and that this information may be cause for refusal to issue a license: and
- C. That the applicant understands that knowingly making a false statement in the application, during the application process or in a document made a part of the application is among the grounds for refusal to issue a license or other disciplinary action, up to and including revocation or suspension of a license.

I understand that I/the Applicant may be subject to criminal prosecution for making false statements on my application, based on the following:

- A. Making a false statement under oath or affirmation constitutes false swearing in violation of 17-A M.R.S.A. § 452 (Class D) provided that I do not believe the statement to be true and that I make the statement with the intent to mislead a public servant performing his/her official duties.
- B. Making a written false statement that I do not believe to be true on my application constitutes unsworn falsification in violation of 17-A M.R.S.A. § 453 (Class D).
- C. Making a false written statement that I do not believe to be true with the intent to deceive a public servant in the performance of his/her official duties constitutes unsworn falsification in violation of 17-A M.R.S.A. § 453 (Class D).

I further consent to any background investigation necessary to determine the present and continuing suitability of the Applicant and that this consent continues as long as the Applicant holds a Maine gaming license or certification, and for 90 days following the expiration or surrender of such gaming license or certification. I understand that further information may be requested of the Applicant in regard to this application, and that the Applicant agrees to supply such information upon request.

I understand that the information provided in this form along with other information will be used by the Unit to judge my suitability and that this information may be cause for the refusal to issue a license.

Applicant's Business Name	Trade Name (DBA)
Printed Full Legal Name of Agent (First, Middle, Last)	Title
Signature	Date
NOTARY USE ONLY	
State of: _____)	
County of: _____)	
Subscribed & sworn to before me by: _____	
This ____ day of _____, 20 ____	
My commission expires: _____	

Signature (Notary Public)

INVESTIGATION AUTHORIZATION AUTHORIZATION TO RELEASE INFORMATION

Company Name _____

Authorized Name (President/CEO) _____

On behalf of _____, I, _____, hereby authorize the Maine Gambling Control Unit, any 3rd party contractor, its agents, or employees to conduct a complete investigation into the background of _____, using whatever legal means they deem appropriate.

Company Name

I, on behalf of the applicant, its legal representatives and assigns, understand and acknowledge that by submitting this application, an investigation to include a full range of criminal history checks, may be performed with regard to persons identified in 8 M.R.S.A., Chapter 31, §1016(3), to include key executives, directors, officers, partners, shareholders, creditors, owners, and associates of _____.

Company Name

The Unit reserves the right to investigate all relevant information and facts to its satisfaction. I understand that the Maine Gambling Control Unit may conduct a complete and comprehensive investigation to determine the accuracy of all information gathered. However, the State of Maine, Maine Gambling Control Unit, 3rd party contractor, and other agents or employees of the State of Maine shall not be held liable for the receipt, use, or dissemination of inaccurate information from any source.

I, on behalf of the applicant, its legal representatives and assigns, consent to the disclosure of information on the applicant and any person subject to investigation under 8 M.R.S.A., Chapter 31, §1016(3) by the Maine Gambling Control Unit, 3rd party contractor, to any law enforcement or any regulatory agency of this or any other state, the government of the United States, any foreign country, or any Indian Tribe.

I, on behalf of the applicant, its legal representatives and assigns understand information could include any information contained within the application filed by _____ within any financial or personnel record, and information obtained from any source, or any information maintained by the Unit, 3rd party contractor, unless otherwise designated confidential by law.

I, on behalf of the applicant, its legal representatives and assigns, hereby release, waive, discharge, and agree to hold harmless, and otherwise waive liability as to the State of Maine, the Maine Gambling Control Unit, 3rd party contractor, and other agents or employees of the State of Maine for any damages resulting from any use, disclosure, or publication in any manner, other than a willfully unlawful disclosure or publication of any material or information acquired during inquiries, investigations, or hearings, and hereby authorize the lawful use, disclosure, or publication of this material or information.

Applicant's Business Name	Trade Name (DBA)
Printed Full Legal Name of Agent (First, Middle, Last)	Title
Signature	Date
NOTARY USE ONLY	
State of: _____)	
County of: _____)	
Subscribed & sworn to before me by: _____	
This _____ day of _____, 20 ____	
My commission expires: _____	

Signature (Notary Public)

APPLICANT'S REQUEST TO RELEASE INFORMATION

Applicant's Name

ON BEHALF OF THE APPLICANT: _____

Entity to Which Request is Addressed

TO: _____

1. I hereby authorize and request full disclosure and release of any and all information, materials, and documents concerning the applicant requested by the Maine Gambling Control Unit, 3rd party contractor, its agents, or employees, whether the information, materials, and documents are of a public, private, or confidential nature and whether the information, materials, and documents would otherwise be protected from disclosure by any constitutional, statutory or common law privilege.
2. I understand that my application will result in a financial records check. I authorize the person named above to release to the Maine Gambling Control Unit, 3rd party contractor, its agents, or employees, a complete and accurate record of the applicant's financial transactions, including but not limited to internal banking memoranda, past and present loan applications, checking account records, savings deposit records, safe-deposit box records, securities transactions, and any other documents relating to the applicant's personal or business financial records in whatever form and wherever located.
3. I authorize the Maine Gambling Control Unit, 3rd party contractor, its agents, or employees to determine the person or entity to which this request is to be presented and to insert that person or entity's name in the appropriate location in this request.
4. I understand that the Maine Gambling Control Unit, 3rd party contractor, its agents, or employees will conduct a complete and comprehensive investigation to determine the validity of all information gathered. The Unit, the State of Maine, and the agents and employees of either, will not be held liable for inaccurate information.
5. If this request is not sufficient to obtain access to certain records, I understand that I or another authorized representative of the applicant may be asked to sign another appropriate authorization or release and that any failure to do so may be taken into consideration by the Maine Gambling Control Unit, 3rd party contractor, its agents, or employees in reviewing the application.
6. I understand that I may revoke this request in writing at any time and that the Maine Gambling Control Unit, 3rd party contractor, its agents, or employees may take the revocation into consideration in reviewing the application.
7. This request is valid for a period not to exceed 18 months from the date of execution.
8. I, for the applicant and its agents, administrators, successors, and assigns, hereby release the providers of the information collected pursuant to this request, and their agents and employees, from any and all liability arising out of or by reason of complying with this request.
9. A photocopy of this request will be considered as valid and effective as the original.

Applicant's Business name	Trade Name (DBA)
Printed Full Legal Name of Agent (First, Middle, Last)	Title
Signature	Date

4. ATTACH THE FOLLOWING INFORMATION

In addition to any information required by statute or rule, application forms require the applicant to provide the following:

1. Legal Name and Addresses - The legal name of the person(s) seeking the license, a full current address and addresses for the prior 15 years;
2. Corporation - If the person seeking a license is a corporation: the names and addresses of all directors and officers, the date of incorporation and the place of incorporation;
3. Partnership - If the person seeking a license is a partnership: the names and addresses of all partners. If a partner is a corporation, the date of incorporation, the place of incorporation and the names and addresses of all directors and officers;
4. Limited Liability Company – If the person seeking a license is a limited liability company, the names and addresses of all members. If a member is a corporation, the date of incorporation, the place of incorporation and the names and addresses of all directors and officers;
5. Race Tracks - The names of the race tracks the advance deposit wagering operator has contracts with or will have contracts with at the time the license is issued that allow the applicant to provide wagering on the product;
6. Financial Information - Financial information that demonstrates the financial resources to operate advance deposit wagering;
7. Purchase a bond to secure the advance deposit wagering accounts under 8 M.R.S. § 1073(4)(A);
8. Certificate of authority to transact business in the State of Maine, unless the requirement for authority is subject to a statutory exception;
9. A record of previous issuances and denials of or any adverse action taken against a gambling-related license or application under 8 M.R.S. Chapter 31 or in any other jurisdiction. For purposes of this paragraph, "adverse action" includes, but is not limited to, a condition resulting from an administrative, civil or criminal violation, a suspension or revocation of a license or a voluntary surrender of a license to avoid or resolve a civil, criminal or disciplinary action;
10. Disclosure by the applicant if it or any account wagering affiliate has accepted a wager from a resident of the State of Maine within the past three (3) calendar years;
11. Maine Tracks – A written, notarized statement from each track licensed under 8 M.R.S. § 271 that has made races available for simulcast in the 12 months preceding the date of the license application confirming the applicant has an agreement in place to accept wagers on races originating from said track and made available for simulcast for the applicable term of the license; All applicable information requested on pages 6 through 24 of the application.
12. Trade Name Registration
13. Physical address of the applicant's principal place of business and designated contact person for the applicant.
14. A notarized affirmation and consent and authorization to release information about the applicant necessary to complete a background check.

15. Bylaws and Articles of Organization, including amendments Organizational minutes and/or other corporate records reflecting ownership and election of officers.
16. Partnership Agreement, including amendments
17. Trust Agreement, including amendments
18. If a corporation, biennial reports, and SEC filings, if any, for past 3 years.
19. If partnership, list of the amount and date of each capital contribution of any partner to the applicant.
20. Certified copies of the applicant's charter, articles of incorporation, partnership agreement, including amendments, restated articles, and other documents that explain the legal organization of the applicant.
21. Copies of the applicant's audited financial statements for the preceding three (3) fiscal years and a copy of internally prepared financial statements for the current fiscal year as at the close of the most recent fiscal quarter.
22. Copies of the applicant's State and Federal tax returns for a period of three (3) fiscal years.
23. Copies of the declaration pages of all insurance policies insuring the applicant or the premises.
24. The ten (10) largest unsecured creditors which are not publicly traded entities or accounting firms or legal firms of the applicant who are owed more than \$25,000 by the applicant for a period in excess of sixty days.
25. The names of racetracks that the applicant is under contract or will be under contract with.
26. For the applicant and each person disclosed in the application, a record of previous issuances and denials of or any adverse action taken against a gambling-related license or application under this Title or in any other jurisdiction. For purposes of this paragraph, "adverse action" includes, but is not limited to, a condition resulting from an administrative, civil, or criminal violation, a suspension or revocation of a license or a voluntary surrender of a license to avoid or resolve a civil, criminal, or disciplinary action.
27. A copy of the final order of all civil judgements against the applicant, partners, and investors.
28. A full copy of the applicant's most recent Security assessment according to rule §5, (9).
29. Plan of Operations according to Board Rules to achieve security, availability, integrity, confidentiality and privacy of all operations of advance deposit wagering.
30. Organizational chart listing key applicants and positions being held for advance deposit wagering operations, along with their duties and responsibilities.
31. A completed Gambling Control Board form MGCB-9200 for those identified in rule §2.
32. Any additional information requested by the director by rule.

5. APPLICATIONS FOR KEY EXECUTIVES ATTACHED

1. Submit Personal History Disclosure forms MGCB-9200 for persons identified in rule §2.
2. The Director may require that additional persons submit applications.

6. APPLICATION FEES AND BACKGROUND INVESTIGATION DEPOSIT

Submit appropriate license, application, and background fees.

Advance Deposit Wagering Operator: \$1,000 nonrefundable application fee.

Advance Deposit Wagering Operator: \$500 nonrefundable license fee.

Background Investigation: \$2,500 nonrefundable fee

**Maine Gambling Control Board
Advance Deposit Wagering Business Entity Application
MGCB-9000**

Applicants Name _____ DBA _____

Business Address _____ City _____ State _____ Zip _____

Primary Contact Person _____ Title _____

Email _____ Phone () _____ Fax _____

Business Structure (example; Corporation, Partnership, LLC, etc.) _____ State of Incorporation _____

Date of qualification to conduct business in Maine _____ Attach copy of certification

List all parent or subsidiaries to the applicant _____

- On a separate page list all principal places of business for the past 10 years, if different from above

**ANY CHANGES IN OWNERSHIP OR BUSINESS
STRUCTURE**

Person who maintains applicant's business records	Title
Address	Phone Number
Person who prepares applicant's tax returns, government forms & reports	Title
Address	Phone Number
Location of financial books and records for applicant's business	
Applicant's Printed Name (Last name, First Name, Middle Name)	
Signature of Applicant	Date

OWNERSHIP STRUCTURE		
Please list the individual applicant and each key employee, officer, director, partner, shareholder, creditor, associate, or owner of any legal or beneficial interest in the application, whether they have ownership interest or not. If an entity (corporation, partnership, LLC, etc.) has interest, list all persons affiliated with such entity; their ownership in the entity, and their effective ownership in the license. List all parent, holding or other intermediary business interests. A Advance Deposit Wagering PHDF MGCB-9200 application must be submitted for each person with a direct or indirect interest in the company, including officers, directors, equity security holders or shareholders of 10% or more, partners, general partners, limited partners, trustees, beneficiaries, key executives, and any other individuals who exert significant influence in the company. List any institutional investors 10% or more that have no influence in the day-to-day operations. Attach a letter attesting to that position. If a publicly traded corporation, submit recent shareholder list from your transfer agent for all shares of common and preferred stock. Make additional copies of this page, if necessary.		
Name	Title	MGCB – 9200 Application Attached Yes No
Business Affiliated With (Parent business or sub-entity)		Percentage of ownership
Name	Title	MGCB – 9200 Application Attached Yes No
Business Affiliated With (Parent business or sub-entity)		Percentage of ownership
Name	Title	MGCB – 9200 Application Attached Yes No
Business Affiliated With (Parent business or sub-entity)		Percentage of ownership
Name	Title	MGCB – 9200 Application Attached Yes No
Business Affiliated With (Parent business or sub-entity)		Percentage of ownership
Name	Title	MGCB – 9200 Application Attached Yes No
Business Affiliated With (Parent business or sub-entity)		Percentage of ownership
Institutional Investor - Name	Percentage of ownership	*Waiver Letter Attached Yes No
Contact Person & Title		Phone
E-mail address		
Institutional Investor - Name	Percentage of ownership	*Waiver Letter Attached Yes No
Contact Person & Title		Phone
E-mail address		
Institutional Investor - Name	Percentage of ownership	*Waiver Letter Attached Yes No
Contact Person & Title		Phone
E-mail address		

*For each institutional investor, include on the investor’s letterhead a certified/notarized letter indicating that the institution has nothing to do with the day to day operations of the applicant, if that is indeed the case. Institutional investors still will be a part of the background investigation of the applicant to the degree applicable.

LICENSING HISTORY**CIRCLE ANSWER**

- | | | |
|---|-----|----|
| 1. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever applied for a gaming license in this or any other jurisdiction, foreign or domestic, whether or not the license was issued? If YES, provide details on a separate sheet, including jurisdiction, type of license, license number, and dates license held or applied for. | YES | NO |
| 2. Has the applicant, the applicants parent company, any other intermediary affiliate of applicant, or any of the persons identified in the ownership structure ever been denied a gaming license, withdrawn a gaming license or had any adverse action taken against any gaming license that they have held in this or any other jurisdiction, foreign or domestic? If YES, provide details on a separate sheet, including jurisdiction, type of action, and date of action. | YES | NO |
| 3. Is the applicant, the applicant's parent company or any other intermediary affiliate of applicant in good corporate standing in Maine and in all other states where it is authorized to transact business? If YES, provide jurisdictions on a separate sheet. If NO, provide details on a separate sheet, including jurisdiction, type of action, and date of action. | YES | NO |
| 4. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever been charged with, or convicted of, any illegal gaming activity in Maine or any other jurisdiction? If YES, provide details on a separate sheet, including jurisdiction, type of action, and date of action. | YES | NO |

FINANCIAL HISTORY**CIRCLE ANSWER**

- | | | |
|---|-----|----|
| 1. Is the applicant, the applicant's parent company or any other intermediary affiliate of applicant delinquent in the payment of any judgments or tax liabilities due to any governmental agency anywhere? If YES, provide details on a separate sheet and attach any documents to prove settlement or resolution of the delinquency. | YES | NO |
| 2. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever held a financial interest in a gambling venture, including but not limited to, a racetrack, dog track, racehorse, or dog, lottery, casino, bookmaking operation, internet casino, card room, bingo parlor or pull tabs, whether or not a license to hold such interest was applied for or received? If YES, provide details on a separate sheet. | YES | NO |
| 3. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever filed a bankruptcy petition, had such a petition filed against it, or had a receiver, fiscal agent, trustee, reorganization trustee or similar person appointed for it? If YES, provide details on a separate sheet and attach any documents from the bankruptcy court. | YES | NO |
| 4. Has a complaint, judgment, consent decree, settlement or other disposition related to a violation of federal, state, or similar foreign antitrust, trade or security law or regulation ever been filed or entered against the applicant, the applicant's parent company or any other intermediary affiliate of applicant? If YES, provide details on a separate sheet and attach any documents to prove the settlement of any of these issues. Include any items currently under formal dispute or legal appeal. | YES | NO |
| 5. Does the applicant, the applicant's parent company or any other intermediary affiliate of applicant now own, has it ever owned, or does it otherwise derive a benefit from, assets held outside the United States, whether held in the business' name or another name, on its behalf or for another entity, or through other business entities, or in trust, or in any other fashion or status? If YES, provide details on a separate sheet. | YES | NO |
| 6. Is the applicant, the applicant's parent company or any other intermediary affiliate of the applicant ever been a party to a lawsuit, either as a plaintiff or defendant, complainant, or respondent, or in any other fashion, in this or any other country? If YES, provide details on a separate sheet and attach any documents to prove the settlement of any of these issues. Include any items currently under formal dispute or legal appeal. | YES | NO |

FINANCIAL HISTORY (Continued)**CIRCLE ANSWER**

- | | | |
|---|-----|----|
| 7. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever been a party to a lawsuit, either as a plaintiff or defendant, complainant, or respondent, or in any other fashion, in this or any other country? If YES, provide details on a separate sheet and attach any documents to prove the settlement of any of these issues. Include any items currently under formal dispute or legal appeal. | YES | NO |
| 8. Has the applicant, the applicant's parent company or any other intermediary affiliate of the applicant filed a business tax return in the past three years? If YES, attach all business tax returns filed in the past three years. | YES | NO |
| 9. Is the business a prospective business or has it recently begun operations? If so, submit an estimated beginning balance sheet (proforma) and a statement of amount(s) and source(s) of funding for the business and specific documentation to support the declaration. | YES | NO |
| 10. Is the business a party to a lease? If YES, attach copies of all leases to which the business is a party | YES | NO |
| 11. Does the applicant have a compliance committee or compliance officer? If YES, attach a copy of compliance committee minutes or compliance officer reports from the past 12 months. | YES | NO |
| 12. Has any interest or share in the profits from gaming been pledged or hypothecated as security for a debt or deposited as a security for the performance of an act or to secure the performance of a contract? If YES, provide details on a separate sheet. | YES | NO |

STATEMENT OF PRE-OPENING CASH

Sports Wagering Business Entity Application

A. Funds Available Prior to Opening:	Totals
1. Current investments (attach schedule providing detail as to who invested the money and what interest in the firm or entity they received for their investment.)	\$
2. Current loans from lending institutions (attach schedule identifying the institution date of each loan, the terms of each loan, and original and current balance).	\$
3. Current loans from individuals and other business entities (attach schedule identifying the individual or business, date of each loan, the terms of each loan, and original and current balance).	\$
4. Anticipated investments (attach schedule providing detail as to who will invest the money and what interest in the firm or entity they will receive for their investment).	\$
5. Anticipated loans from lending institutions (attach schedule certifying the institution and terms of the loan).	\$
6. Anticipated loans from individuals and other business entities (attach schedule identifying the individuals and other business entities and the terms of each loan).	\$
Total Funds Available Prior to Opening:	\$
B. Expenditure or Disposition of Available Funds Prior to Opening:	
1. Prepaid Gaming Taxes and Licenses:	
a. Federal Government Tax & Fees	\$
b. Application Fees	\$
c. Background Investigation Fee	\$
d. Other (describe)	\$
Total Prepaid Wagering Taxes and Licensing Related Fees:	\$
2. Other License Fees (Attach Schedule)	\$
3. Incurred Expenditures for:	
a. Building, Including Construction and Repair (Attach Schedule)	\$
b. Equipment (Attach Schedule)	\$
c. Supplies (Attach Schedule)	\$
d. Attach all Other Pre-Opening Expenditures (Salaries, Advertising, Deposits, Etc.) (Attach Schedule)	\$
4. Anticipated Expenditures for:	
a. Building, Including Construction and Repair (Attach Schedule)	\$
b. Equipment (Attach Schedule)	\$
c. Supplies (Attach Schedule)	\$
Total Pre-Opening Cash Used:	\$
C. Cash Available for Operation (A Minus B)	
Show in What Form This Cash Will Be:	\$
a. Bank	
b. Other Cash Register Funds	\$
c. Other (Describe)	\$
Total Opening Cash:	\$
Printed Full Legal Name of Agent (Last Name, First Name, Middle Name)	
Signature of Authorized Agent	Date