

# **VIRGINIA LOTTERY GAMING LICENSING and INVESTIGATIONS DIVISION**



## **PROCEDURES MANUAL for ACCOUNT REPRESENTATIVES**

This procedures manual is intended to serve as a guide for Account Representatives designated by a casino operator to facilitate casino gaming application submissions to the Virginia Lottery. The Account Representative should serve in a role of Compliance Officer or an equivalent position as the individual will be responsible for handling confidential and sensitive information. This manual will assist the Account Representative with establishing user accounts for casino gaming applicants and other required functions.

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## GENERAL INFORMATION

The account representative will be responsible for working with the Virginia Lottery to identify all application types that are required to be completed. The account representative must also ensure all required supporting documents are provided by the applicant. The account representative will be required to upload these documents into the online application system as the applicants will not have this capability. There are checklists available for each application category that are included with this manual (pages 35 through 45) to assist account representatives with ensuring all required documents are received from the applicant and submitted with the application. The account representative must also ensure that all required fees are submitted to the Virginia Lottery. An application will not be considered by the Virginia Lottery until all required information and fees are remitted. Once an application and all supporting documents have been submitted, it becomes the property of the Virginia Lottery and will not be returned.

### Definitions:

- **Facility Operator** – An entity that operates or manages the operation of a casino gaming facility, not to include a riverboat or similar vessel. A “facility operator’s license” is the authority given by the “Board” to a facility operator for the legal operation of casino gaming.
- **Manufacturer** - An entity:
  - a. That is engaged in the business of designing, building, constructing, assembling, manufacturing, or distributing table games or table game equipment, a central monitor and control system, slot machines, associated equipment or software, mechanical casino games, or the cabinet in which a slot machine or mechanical casino game is housed;
  - b. That produces a product that is intended for sale, lease, or other assignment to the Board or a Facility Operator licensee;
  - c. That produces a product related to table games that is intended for sale, lease, or other assignment to a licensee or permit holder
  - d. That contracts with the Board, a licensee, or permit holder for the sale, lease, or other assignment of a product described in subdivision (a).

A manufacturer “supplier permit” is the authority given by the department to an entity to perform the functions permitted by the Virginia Lottery.

- **Slot Machine Management System Provider** – An entity that operates or manages Virginia Lottery’s central monitor and control system or a casino facility operator’s slot machine management system. A slot machine management system provider “supplier permit” is the authority given by the department to an entity to perform the functions permitted by the Virginia Lottery.
- **Key Manager** - is:
  1. An individual who owns, controls, or manages a licensee or otherwise exercises control over the gaming functions of a facility operator licensee;
  2. An employee of a permit holder who manages or operates the facility, supervises the security of the facility, or is otherwise considered by the department to be a key manager; and
  3. Is not a gaming employee.

A key manager “supplier permit” is the authority given by the department to an entity to perform the functions permitted by the Virginia Lottery.

- **Principal** – An individual who, solely or together with the individual’s immediate family members, (i) owns or controls, directly or indirectly, five percent or more of the pecuniary interest in any entity that is a

licensee, or (ii) has the power to vote or cause the vote of five percent or more of the voting securities or other ownership interests of such entity, and any person who manages a gaming operation on behalf of a licensee.

A key manager or principal “supplier permit” is the authority given by the department to an individual to perform the functions permitted by the department or an “principal”.

- **Principal Entity** – An entity that, solely or together with the individual’s immediate family members, (i) owns or controls, directly or indirectly, five percent or more of the pecuniary interest in any entity that is a licensee, or (ii) has the power to vote or cause the vote of five percent or more of the voting securities or other ownership interests of such entity, and any person who manages a gaming operation on behalf of a licensee.
- **Gaming Employee** –An individual who:
  1. Is or is seeking to be employed by an applicant for or holder of a “facility operator’s license” and whose duties relate or will relate to the operation of a facility, and who performs or supervises or will perform or supervise the performance of:
    - a. Operating, servicing, or maintaining a casino gaming machine, table game, or associated equipment;
    - b. Accounting, maintaining, or auditing a facility's financial records;
    - c. Counting or processing casino gaming machine or table game revenue;
    - d. Conducting security or surveillance in or around a facility; or
    - e. Operating or maintaining a facility's information systems;
  2. Is employed by a casino permit holder and whose duties directly relate to the repair, service or distribution of a casino gaming machine, table game, or associated equipment, or is otherwise required to be present on the gaming floor or in a restricted area of the facility;
  3. Is employed by a casino permit holder as a junket representative (an individual who negotiates the terms of, or engages in the referral or selection of an individual who may participate in, a junket to a facility, regardless of whether the activity occurs in the Commonwealth of Virginia).
  4. Is otherwise required by the department to hold a service permit as a gaming employee.

A gaming employee “service permit” is the authority given by Virginia Lottery to a “gaming employee” that authorizes that person or individual to perform the functions permitted by Virginia Lottery.

- **Nongaming Employee** – An individual who is:
  1. Employed or is seeking to be employed by an applicant for or holder of an operation license and whose duties are or will be other than the duties of a gaming employee; or
  2. Otherwise required by the department to hold a service permit as a gaming employee.

A nongaming employee “service permit” is the authority given by Virginia Lottery to a “gaming employee” that authorizes that person or individual to perform the functions permitted by Virginia Lottery.

- **Institutional Investor** - means:
  1. A retirement fund administered by a public agency for the exclusive benefit of federal, state, or local public employees;
  2. An investment company registered under the Investment Company Act of 1940;
  3. A collective investment trust organized by banks under Part 9 of the rules of the Comptroller of the Currency;
  4. A closed end investment trust;
  5. A chartered or licensed life insurance company;
  6. A property and casualty insurance company;
  7. A banking or other chartered or licensed lending institution;

8. An investment advisor registered under the Investment Advisors Act of 1940; or
9. Any other person registered in any foreign jurisdiction and regulated in accordance with a statute of any foreign jurisdiction that the board determines to be substantially similar to that regulated by the Investment Company Act of 1940 or the Investment Advisors Act of 1940.

A person deemed to be an “institutional investor” will be waived from qualifying for a license, permit, or registration.

**Vendor** – is an entity that provides goods or services to a casino gaming facility applicant or licensee and who is not required to be licensed as a manufacturer or contractor under the gaming law, this section, or department policy and directive, and includes:

1. Except for Virginia Alcoholic Beverage Control, providers of alcoholic beverages;
2. Providers of food and nonalcoholic beverages;
3. Refuse handlers;
4. Vending machine providers and service personnel;
5. Janitorial and maintenance companies;
6. Tenant businesses or franchises located within facilities if such goods and services are not gaming related;
7. Providers of transportation services if such services are not gaming related;
8. Persons involved in the construction of a facility;
9. Lessors of real property or goods;
10. Payroll services and other employer related services;
11. Employee recruiting services; and
12. Persons whose services the board reviews and determines must be registered or certified under this regulation.

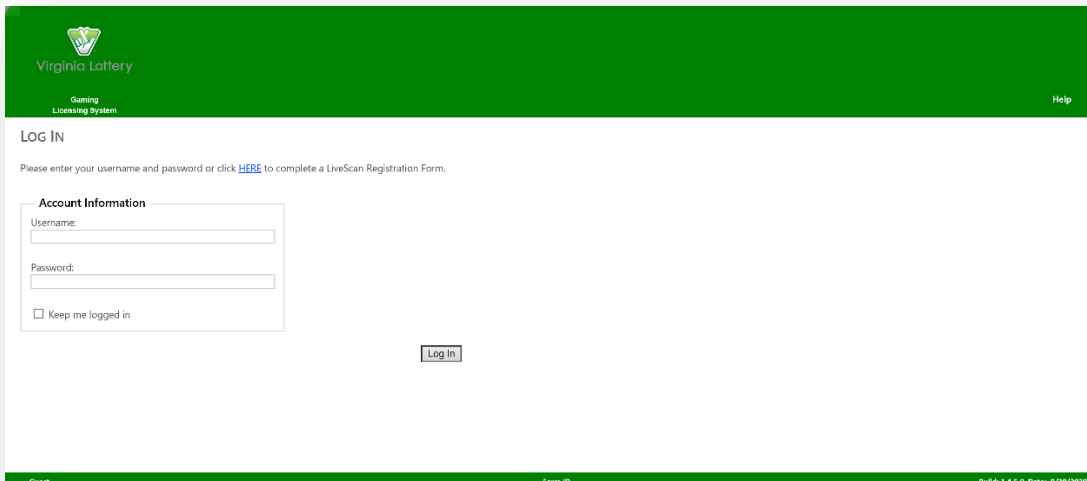
Vendors will be placed in one of two categories, “major” or “minor”. A contracted vendor providing services to a casino facility operator with goods and services valued at \$20,000 or more will be categorized as a Vendor-Major. Vendors providing goods or services valued at less than \$20,000 will be categorized as a Vendor-Minor. A vendor “service permit” is the authority given by Virginia Lottery to a vendor that authorizes that entity or individual to perform the functions permitted by Virginia Lottery.

## ESTABLISHING SYSTEM ACCESS for APPLICANT REPRESENTATIVE

To establish an account within the Virginia Lottery's online application system as an Account Representative, you must contact our Gaming Licensing and Investigations Division at [gaminglicensing@VALOTTERY.COM](mailto:gaminglicensing@VALOTTERY.COM) or (804) 692-7165 during normal business hours. You will be required to provide the name of the applicant company you will be submitting applications on behalf of, your full name, and contact information.

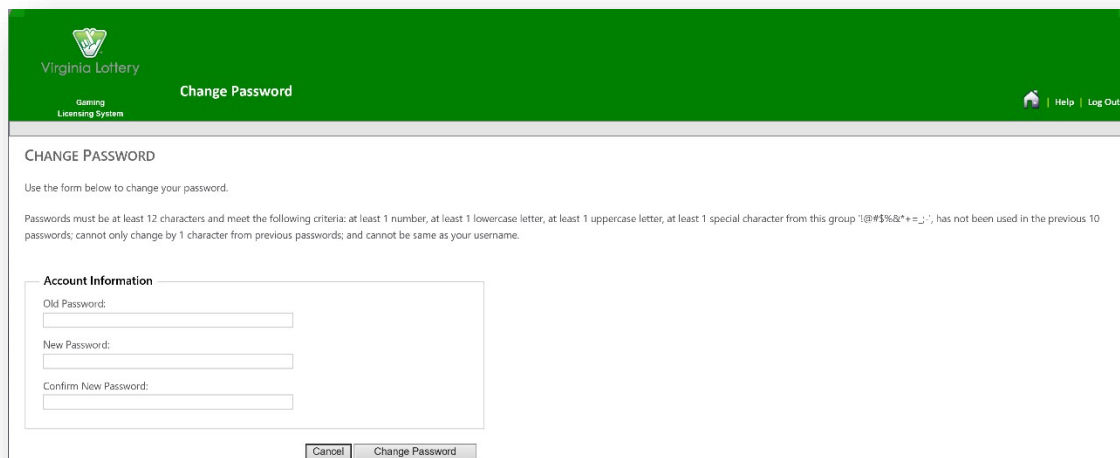
Once your user account has been set up, you will be provided with the URL and credentials to access the online application portal. After accessing the portal, you will need to:

- Enter your username in the appropriate field;
- Enter the temporary password provided to you;



The screenshot shows the login page of the Virginia Lottery Gaming Licensing System. The page has a green header with the Virginia Lottery logo and the text "Gaming Licensing System" and "Help". Below the header, the page is titled "LOG IN" and contains the instruction: "Please enter your username and password or click [HERE](#) to complete a LiveScan Registration Form." There is a form titled "Account Information" with fields for "Username:" and "Password:". Below the password field is a checkbox labeled "Keep me logged in". A "Log In" button is located below the form.

- You will then be prompted to change your password by first entering the temporary password before entering your new password. Your new password must be 12 or more characters containing all the following: special character(s), alphabetical character(s), numerical character(s), upper case letter(s), **and** lowercase letter(s):



The screenshot shows the "Change Password" page of the Virginia Lottery Gaming Licensing System. The page has a green header with the Virginia Lottery logo and the text "Gaming Licensing System" and "Change Password" and "Home | Help | Log Out". Below the header, the page is titled "CHANGE PASSWORD" and contains the instruction: "Use the form below to change your password." There is a paragraph of text: "Passwords must be at least 12 characters and meet the following criteria: at least 1 number, at least 1 lowercase letter, at least 1 uppercase letter, at least 1 special character from this group '!@#%&\*+=\_~', has not been used in the previous 10 passwords; cannot only change by 1 character from previous passwords; and cannot be same as your username." There is a form titled "Account Information" with fields for "Old Password:", "New Password:", and "Confirm New Password:". Below the form are "Cancel" and "Change Password" buttons.

- You are now set up and will be able to access and use the system as an Account Representative.

## THE APPLICATION PROCESS

1. Access the landing page and select “click here” to obtain fingerprinting instructions to provide to the applicant:

Virginia Lottery  
Gaming  
Licensing System

Session Timeout - your session has expired due to an extended period of inactivity. You will need to reauthenticate to access the requested information.

**LOG IN**

Please enter your username and password or click [HERE](#) to complete a LiveScan Registration Form.

**Account Information**

Username:  
test\_manager

Password:  
\*\*\*\*\*

Keep me logged in

Log In

You will need to enter in the applicant’s name, date of birth and gender before submitting this information. Instructions will appear that will include information on how to set up an appointment with Fieldprint and the instructions will include Virginia Lottery’s Fieldprint code which is required to schedule an appointment. **Keep a copy of the instructions as it will contain a registration number that you will need when entering in the applicant information.**

Virginia Lottery  
Gaming  
Licensing System

**LiveScan Registration Form** Log Out

This LiveScan Registration Form is designed to facilitate an expeditious fingerprinting experience for a Virginia Lottery license application.

Fingerprints will be used to check the criminal history records maintained by the Virginia State Police and the Federal Bureau of Investigation (FBI). The use of the Virginia State Police and FBI criminal history record information will be used to assist in the determination of suitability for the issuance of a Virginia Sports Betting license.

Complete each section below, and then click submit to provide the applicant with further instructions.

**Name**

Last Name:

First Name:

Middle Name:

Suffix:

Maiden Name:

**Information**

Male  Female

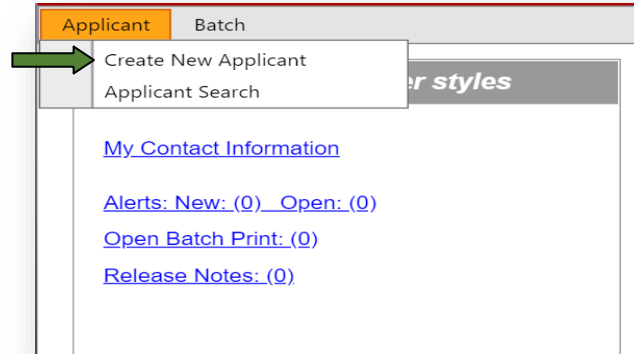
**Date of Birth**

Birth Date:

Submit Cancel

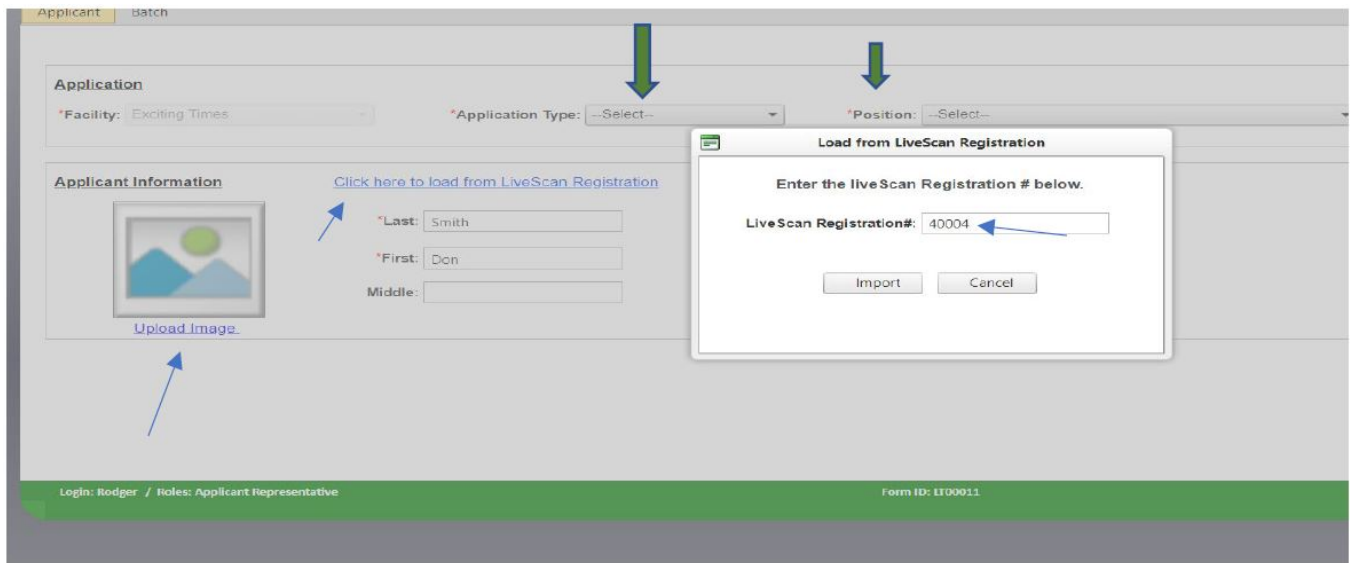
2. Sign into the online application system using your username and password;

3. Select "Create New Applicant" from the "Applicant" tab drop down:



4. On the applicant screen you will need to:

- Select the employee's "application type" from the drop down;
- Select the employee's position from that drop down;
- Select "Click here to load from Live Scan". Enter in the registration number. This will populate the employee's personal information;



- Take and upload a recent color photo of the employee which must be in full-facing view directly facing the camera and with the head centered (as with a passport photo). The photo must be in JPEG format to be uploaded. The photographs must be taken without a hat, head covering or dark glasses.
5. Be sure to use the Save button to save the information and uploaded photo.
6. Fill in the employee's contact and other required information by first selecting the employee's status from the "status" drop down field. See below diagram:




Gaming Licensing System [Lottery Home](#) > [Applicant](#) > [Create New Applicant](#) Help | Log Out

Applicant Batch

App ID: 120 [Start New Application](#) Save

**Applicant Information**



\*Last:

\*First:

Middle:

\*SSN:   No SSN Available

\*DOB:

Gender:  Male  Female

[Upload Image](#)

**Contact Information** [Edit](#)

ADDRESS [< Rec # >](#)

PHONE [< Rec # >](#)

EMAIL [< Rec # >](#)

**Employment Information**

Status:   Terminated

Hire Date:   Resigned

Withdrawn

Reason for Dismissal:

**Login Information**

Login ID: sdavis [Reset Password](#)

Login Status: Active [Print Password](#)

Login Created: 8/29/2020 8:01 PM

Remote Login:

- The system will generate a user-name and a temporary password for you to provide to the applicant who will be prompted to create a new password when the applicant signs into the system for the first time to complete an application. You can obtain this password by clicking the “Print Password in the Login Information box ; (see above diagram)
- The applicant will also need to have certain documents signed and notarized that are not included in the online licensing system. You will need to provide the applicant with copies of these forms for the applicant to have notarized and returned to the you along with the other required documents to be uploaded. The notarized forms for each application type can be found in Appendix A starting on page 12.
- The applicant will be responsible for completing and submitting his/her own application after signing into the system. Once the application has been submitted by the applicant, he/she will not be able to make any changes to it.
- Once the applicant has informed you that he/she has submitted their application, you can sign into the system and select the “Applicant Finished” number hyperlink to begin the batching process.

## THE BATCHING PROCESS

- From the dashboard, click the number / hyperlink for “Application Finished” to access applications to be batched. Under the “Un-Batched Applications” tab click on the applicant’s Case ID number:

**Caseload Status**

<u>Facility Manager</u>		Renewal
Application Created:	0	0
Application In Progress:	1	0
Application Finished:	1	0
Ready For Batch:	0	0
Total:	2	0

Applicant **Batch**

Un-Batched Applications    Ready for Batch

**Un-Batched Applications**

Case Status: Application Finished    Checklist Status: --All--

Case ID	Application Date	Last Name	First Name
100022	08/11/2020	vick	mike

- At this time you will upload **all** the required supporting documents pertaining to the applicant as the applicant will not have the ability to upload documents. You may save the completed uploads at any time and resume uploading by logging in and selecting the applicant. Enter the date that the specific document type was uploaded and select that it was completed. Click “Save” after completing the uploads and once the documents have all been uploaded, click the “Approve Submission” button.

Virginia Lottery    **Applicant Case**    Lottery Home > Applicant > Applicant Case    Help | Log Out

Applicant **Batch**

**Applicant Information**

Applicant Name: story, kori none

SSN: 888-88-8888

App ID: [119](#)

**Case Information**

Case ID: 100019 Version: 1

Application Type: Non-Gaming

Case Status: Application Finished

License Date:

Badge Number:

**Contact Information** [Edit](#)

ADDRESS ≤ Rec # ≥

PHONE ≤ Rec # ≥

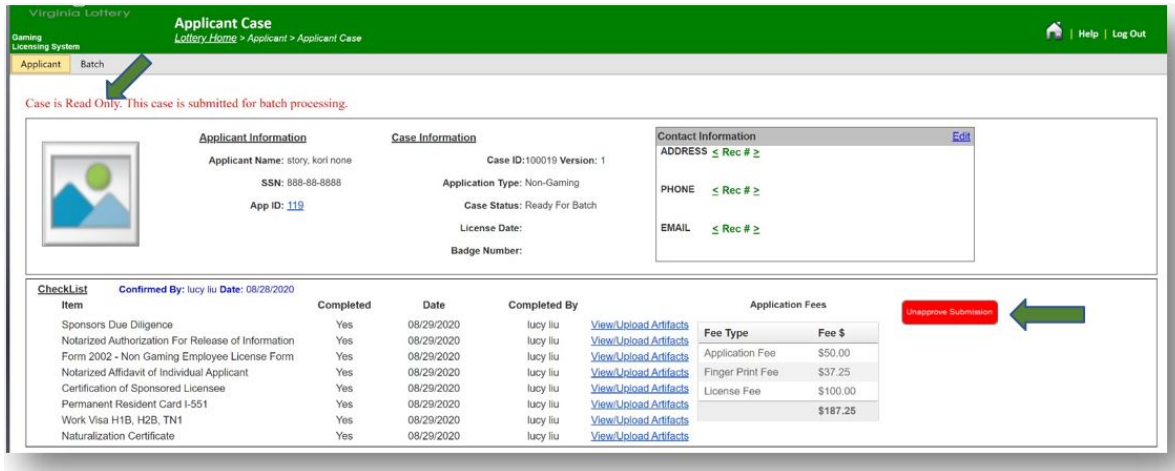
EMAIL ≤ Rec # ≥

Item	Completed	Date	Completed By	Application Fees										
Sponsors Due Diligence	Yes	08/29/2020	lucy liu	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Fee Type</th> <th>Fee \$</th> </tr> </thead> <tbody> <tr> <td>Application Fee</td> <td>\$50.00</td> </tr> <tr> <td>Finger Print Fee</td> <td>\$37.25</td> </tr> <tr> <td>License Fee</td> <td>\$100.00</td> </tr> <tr> <td><b>Total</b></td> <td><b>\$187.25</b></td> </tr> </tbody> </table>	Fee Type	Fee \$	Application Fee	\$50.00	Finger Print Fee	\$37.25	License Fee	\$100.00	<b>Total</b>	<b>\$187.25</b>
Fee Type	Fee \$													
Application Fee	\$50.00													
Finger Print Fee	\$37.25													
License Fee	\$100.00													
<b>Total</b>	<b>\$187.25</b>													
Notarized Authorization For Release of Information	Yes	08/29/2020	lucy liu											
Form 2002 - Non Gaming Employee License Form	Yes	08/29/2020	lucy liu											
Notarized Affidavit of Individual Applicant	Yes	08/29/2020	lucy liu											
Certification of Sponsored Licensee	Yes	08/29/2020	lucy liu											
Permanent Resident Card I-551	Yes	08/29/2020	lucy liu											
Work Visa H1B, H2B, TN1	Yes	08/29/2020	lucy liu											
Naturalization Certificate	Yes	08/29/2020	lucy liu											

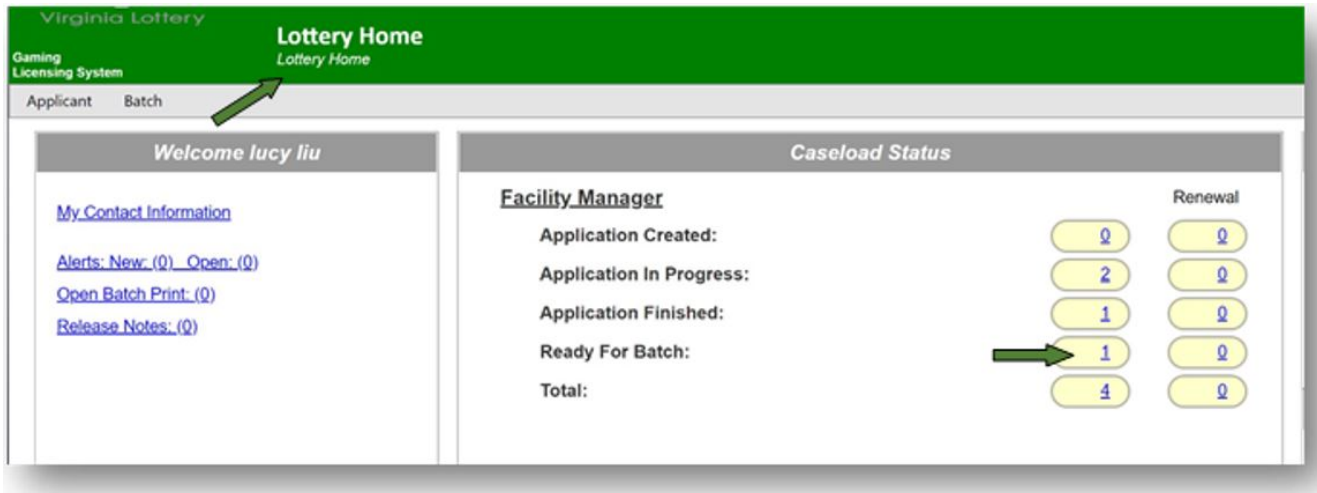
Save

Approve Submission

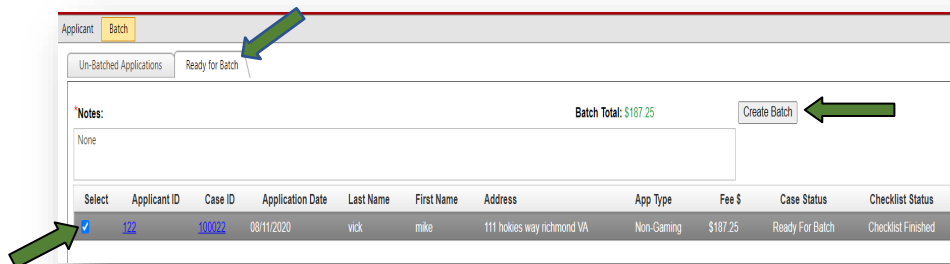
3. You will know that you have successfully approved the submission when you get the message indicating, "Case is Read Only". If you need to rescind the submission to make corrections or modifications, you can click the "unapproved submission" button. After you submit the case, it is ready for batch processing.



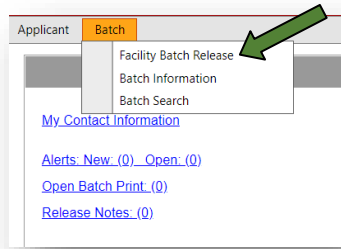
4. Click on "Lottery Home" to access the dashboard and then click the "Ready to Batch" hyperlink:



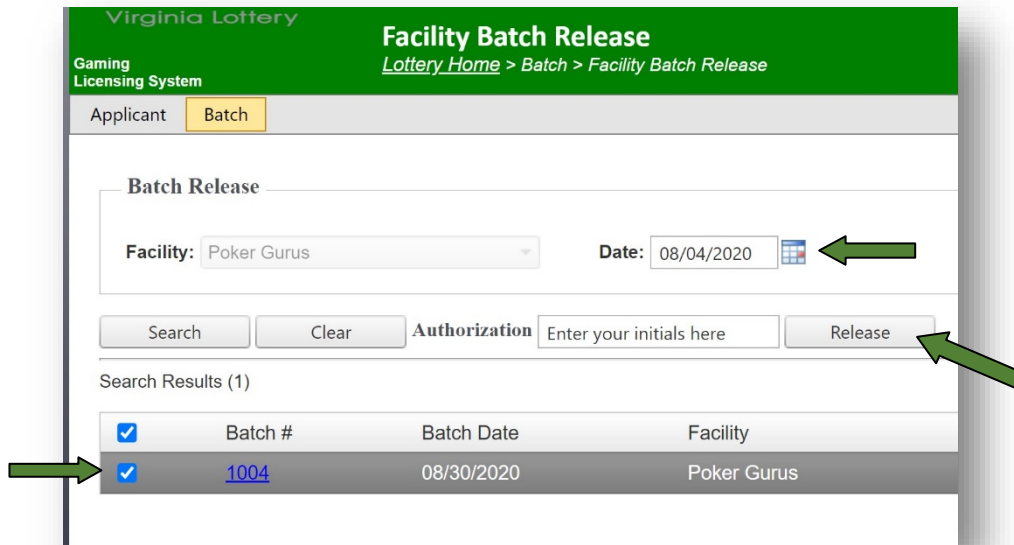
5. Click on the "Ready for Batch" sub-tab and then select the applicant. Then add notes before clicking the "CreateBatch" button:



6. From the “Batch” tab select “Facility Batch Release” from the dropdown.



7. Then select the Batch number for the application(s) to be released, enter the date of the release, and complete the “authorization” field by typing in your initials before clicking the “Release” button: Wire the funds to the Virginia Lottery.



8. At this time all required fees will need to be remitted and to the Virginia Lottery who will receive and confirm payment. At that time the application will be forwarded to Virginia Lottery’s Gaming Licensing and Investigations Division for the vetting process.

## **FEES**

- An approved casino facility operator shall submit a nonrefundable issuance fee of **\$15 million** before the casino **facility operator license** is issued.
- The fee for each **service permit** applicant (which include **gaming employee, non-gaming employee, vendor-major, and vendor-minor** applicants) shall be a nonrefundable **\$500** application fee for the service permit applicant, **plus any applicable fingerprinting fees**.
- The fee for each **supplier permit** (which include **contractor, manufacturer, and slot machine management system provider, principal/key manager** applicants) shall be a nonrefundable **\$5,000 application fee**. In addition, for each **principal** and **key manager** supplier permit a **\$50,000** for the background investigation is to be submitted Following a successful background investigation and prior to issuance of a supplier permit, the supplier permit applicant shall submit a **\$5,000 annual permit fee** and will be required to submit an annual permit fee of **\$5,000** before the start of the next annual term.

**NOTE:** Fees are due at the time of application. Your fee shall be sent by wire or ACH as follows:

**Wire payment to:**

Virginia Lottery Account Number:435029087446

Name of the Account: Gaming License Fees

Transit Routing Number: 26009593

**ACH Instructions:**

Virginia Lottery Account Number:435029087446

Name of the Account: Gaming License Fees

Transit Routing Number: 051000017

## TERMS and RENEWALS

- The term for a **facility operator license** will be **10 years** from the date of issuance and may be renewed for additional 10-year terms. The criteria and procedures for license renewal shall be the same for successive renewal terms as for the initial term of licensure, including the application fees for background and other investigations, unless the facility operator's operational and capital investment plans have been approved for amendment by Virginia Lottery. A casino facility operator shall notify the department 18 months before the expiration of its license term if it does not intend to seek renewal. A casino facility operator seeking a renewal shall submit a completed renewal application, for itself and its principals and employees, along with any required fees, between 15 and 12 months before the expiration of its current license. A nonrefundable renewal fee of \$15 million must be submitted before the facility operator license is re-issued.
  
- **Unless otherwise required by law, a supplier permit shall be automatically renewed each year after the first year for four additional successive annual terms.** A permit holder shall submit to the department an annual permit fee of **\$5,000 before the start of the next annual term.** The department will not conduct a new background investigation of the service permit holder during the four renewal terms. Every five years, a permit holder shall:
  - a. Submit a renewal application six to three months before the expiration date of the permit term, and
  - b. Pay any fees associated with the application and background investigation as directed by the department.
  
- The term of a **service permit** shall be **five years.** A holder of a service permit who wishes to renew the permit shall:
  - a. Submit a renewal application three to two months before the expiration date of the permit term; and
  - b. Pay any fees associated with the application and background investigation as required by the director.

# **APPENDIX – REQUIRED NOTARY FORMS**

## **FACILITY OPERATOR**

**PAGES 16 -17**



Ralph S. Northam, Governor | Kevin Hall, Executive Director

Virginia Lottery | 600 East Main Street | Richmond, VA 23219 | ph: 804.692.7100 | fax: 804.692.7102 | valottery.com

## AUTHORIZATION FOR RELEASE OF INFORMATION

TO: \_\_\_\_\_

FROM: \_\_\_\_\_  
(Applicant's Printed Name)

I am an applicant for a casino facility operator license in the Commonwealth of Virginia.

The Virginia Lottery ("Board") is required by law to investigate an applicant for a facility operator license. That investigation requires the Board to collect and evaluate information about me. I irrevocably give consent to the Board, and persons authorized by the Board, to: (1) verify all information provided in the license application documents; (2) conduct a background investigation of me; and (3) to have access to any and all information that I have provided to any other jurisdiction seeking a similar license in that jurisdiction, as well as the information obtained by that other jurisdiction during the course of any investigation that it may have conducted about me.

By executing this Authorization, I authorize any of the following entities to release to the Board any and all information about me that it requests: local, state or federal government unit; commercial or business enterprise; non-profit entity; individual; or any other public or private entity. The requested information may be released in written, verbal, electronic, or any other form.

With respect to any claims or liability arising from the release of the requested information to the Board, I expressly waive, release, discharge and forever hold harmless and agree to indemnify, the unit, entity, or individual that releases information to the Board under the authority of this Authorization.

A photo, facsimile, or electronic copy of this signed and dated Authorization shall be equally effective as an original.

_____ Signature of Applicant	_____ Date
_____ Printed Name	_____ Title

### NOTARY

The undersigned, a Notary Public in and for the County of \_\_\_\_\_, in the State of \_\_\_\_\_, certifies that the above-named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and to which witness my hand and seal.

Stamp or Seal

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Printed Name

My commission expires \_\_\_\_\_, 20\_\_\_\_

My commission expires \_\_\_\_\_ 20\_\_\_\_





## Affidavit of Representative of Applicant

Please read this document carefully, then sign and date it in ink. Please print the following information:

Applicant's Full Business Name \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I, \_\_\_\_\_ (printed name), am authorized to complete and execute this Facility Operator license application on behalf of \_\_\_\_\_ (printed name of Applicant). I am also authorized to provide all of the information requested as part of this application to the Virginia Lottery Board, its employees, agents, and vendors (collectively, "the Board"), and to make the representations set forth in this Affidavit.

I have read, and understand, every page of this application. To the best of my knowledge, information, and belief, the information that I have provided as part of this application is accurate, complete, and not misleading. I understand that any misrepresentation or omission may lead to the delay or denial of an application for a facility operator license and may subject me to civil or criminal liability. I understand that providing false or misleading information is grounds for the Board to reject this Application, or to suspend or revoke a license.

By a separate Authorization for Release of Information, I am authorizing any individual or person that has information about the Applicant to release that information to the Board for purposes of its investigation of the application for a facility operator license.

On behalf of the Applicant and its successors and assigns, I expressly waive, release, discharge, and forever hold harmless and agree to indemnify, the Board, the Commonwealth of Virginia, and their employees, agents, and representatives, from liability for any and all claims or legal action arising from any actions that the Board or the Commonwealth of Virginia may take related to the collection of information from the Applicant and the use of that information in connection with investigating the Applicant's qualifications for a facility operator license.

A photo, facsimile, or electronic copy of this signed and dated Affidavit shall be equally effective as an original.

\_\_\_\_\_  
Signature of Applicant Date

\_\_\_\_\_  
Print Name of Applicant Title

### NOTARY

The undersigned, a Notary Public in and for the County of \_\_\_\_\_, in the State of \_\_\_\_\_, certifies that the above-named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and to which witness my hand and seal.

Stamp or Seal

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Printed Name

My commission expires \_\_\_\_\_, 20\_\_\_\_

**APPENDIX –REQUIRED NOTARIZED FORMS**

**SUPPLIER PERMIT APPLICANTS**

**PAGES 19 -20**



### AUORIZATION FOR RELEASE OF INFORMATION

**TO:** \_\_\_\_\_

**FROM:** \_\_\_\_\_  
(Printed Name of Applicant Entity)

I am the authorized representative of an Applicant for a supplier permit in the Commonwealth of Virginia.

The Virginia Lottery (“Board”) is required by law to investigate all applicants for a supplier permit. That investigation requires the Board to collect and evaluate information about the entity that I represent. On behalf of the entity, I irrevocably give consent to the Board, and persons authorized by the Board, to: (1) verify all information provided in the permit application documents; (2) conduct a background investigation of the entity; and to have access to any and all information that the entity has provided to any other jurisdiction seeking a similar permit in that jurisdiction, as well as the information obtained by that other jurisdiction during the course of any investigation that it may have conducted about the entity.

By executing this Authorization, I authorize any of the following entities to release to the Board any and all information about the entity that the Board requests: local, State or federal government unit; commercial or business enterprise; non- profit entity; individual; or any other public or private entity. The requested information may be released in written, verbal, electronic, or any other form.

With respect to any claims or liability arising from the release of the requested information to the Board, on behalf of the entity, I expressly waive, release, discharge and forever hold harmless and agree to indemnify, the unit, entity, or individual that releases information to the Board under the authority of this Authorization. Photo, facsimile, or electronic copy of this signed and dated Authorization shall be equally effective as an original.

\_\_\_\_\_  
Signature of Individual Completing Form

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

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### NOTARY PUBLIC

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The undersigned, a Notary Public in and for the County of \_\_\_\_\_, in the State of \_\_\_\_\_, certifies that the above-named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and to which witness my hand and seal.

Notary Public \_\_\_\_\_

**Stamp or Seal** \_\_\_\_\_  
Printed Name

My commission expires \_\_\_\_\_, 20\_\_\_\_



### AFFIDAVIT OF REPRESENTATIVE OF APPLICANT

I, \_\_\_\_\_(printed name), am authorized to complete and execute this Supplier Permit Application on behalf of \_\_\_\_\_(printed name of Supplier). I am also authorized to provide all of the information requested on this Form to the Virginia Lottery, its employees, agents, and vendors (collectively, "the Board"), and to make the representations set forth in this Affidavit.

I have read, and understand, every page of this Application. To the best of my knowledge, information, and belief, the information that I have provided on, or attached to, this Application is accurate, complete, and not misleading. I understand that any misrepresentation or omission may lead to the delay or denial of an application for a permit, or may result in the Board imposing sanctions against the Applicant, up to and including revocation of its permit if it has been awarded or issued a permit. I understand that any misrepresentation or omission on this Application may also subject me, or the supplier that I represent, to civil or criminal liability. I understand and acknowledge that the supplier has an ongoing duty to promptly notify the Board if any information it provides the Board changes.

By a separate Authorization for Release of Information, I am authorizing any entity or individual that has information about the Supplier that I represent, to release that information to the Board for purposes of its investigation of an applicant for a Gaming Supplier permit.

On behalf of the Supplier and its successors and assigns, I expressly waive, release, discharge, and forever hold harmless and agree to indemnify, the Board, the Commonwealth of Virginia, and their employees, agents, and representatives, from liability for any and all claims or legal action arising from any actions that the Board or the Commonwealth of Virginia maytake related to the collection of information from the Supplier and the use of that information in connection with investigating a Supplier.

\_\_\_\_\_  
SIGNATURE OF AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME OF AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
TITLE

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### NOTARY PUBLIC

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The undersigned, a Notary Public in and for the County of \_\_\_\_\_, in the State of \_\_\_\_\_, certifies that the above-named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and to which witness my hand and seal.

Notary Public

\_\_\_\_\_

**Stamp or Seal**

\_\_\_\_\_  
Printed Name

My commission expires \_\_\_\_\_, 20\_\_\_\_

# **APPENDIX – REQUIRED NOTARIZED FORMS**

## **PRINCIPAL and KEY MANAGERS**

**PAGES 22 -23**



### AUTHORIZATION FOR RELEASE OF INFORMATION

**TO:** \_\_\_\_\_  
(To be completed by the Department)

**FROM:** \_\_\_\_\_  
(Printed Name of Applicant)

I am an applicant for a Principal/Key Manager Supplier Permit in the Commonwealth of Virginia.

The Department is required by law to investigate an applicant for a Supplier Permit. That investigation requires the Department to collect and evaluate information about the entity that I represent. On behalf of the entity, I irrevocably give consent to the Department, and persons authorized by the Department, to: (1) verify all information provided in the license application documents; (2) conduct a background investigation of the entity; and to have access to any and all information that the entity has provided to any other jurisdiction seeking a similar license in that jurisdiction, as well as the information obtained by that other jurisdiction during the course of any investigation that it may have conducted about the entity.

By executing this Authorization, I authorize any of the following entities to release to the Department any and all information about the entity that the Department requests: local, State or federal government unit; commercial or business enterprise; non- profit entity; individual; or any other public or private entity. The requested information may be released in written, verbal, electronic, or any other form.

With respect to any claims or liability arising from the release of the requested information to the Department, on behalf of the entity, I expressly waive, release, discharge and forever hold harmless and agree to indemnify, the unit, entity, or individual that releases information to the Department under the authority of this Authorization. Photo, facsimile, or electronic copy of this signed and dated Authorization shall be equally effective as an original.

Signature of Individual Completing Form:

Date:

\_\_\_\_\_

\_\_\_\_\_

Printed Name:

Title:

\_\_\_\_\_

\_\_\_\_\_

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### NOTARY PUBLIC

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The undersigned, a Notary Public in and for the County of \_\_\_\_\_, in the State of \_\_\_\_\_, certifies that the above-named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and to which witness my hand and seal.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Printed Name

**Stamp or Seal**

My commission expires \_\_\_\_\_, 20\_\_\_\_



### AFFIDAVIT OF INDIVIDUAL

I, \_\_\_\_\_ (printed name) am an applicant for a Principal/Key Manager Supplier Permit in the Commonwealth of Virginia. I have read, and understand, every page of this Application.

To the best of my knowledge, information, and belief, the information that I have provided on, or attached to, this Form is accurate, complete, and not misleading. I understand that any misrepresentation or omission may lead to the delay or denial of my application for a Principal/Key Manager Supplier Permit and may subject me to civil or criminal liability. I also understand that providing the Department with false or misleading information is grounds for the Department to reject the application, or to suspend or revoke a license. I also understand that if I am issued a license, I have an ongoing obligation to comply with all licensing requirements and to promptly notify the Department if any information that I provided to the Department changes.

By a separate Authorization for Release of Information, I am authorizing any entity or individual that has information about me to release that information to the Department, its employees, agents, and vendors (collectively, "the Department"), for purposes of its investigation of the application for a casino permit.

I expressly waive, release, discharge, and forever hold harmless and agree to indemnify, the Department, the Commonwealth of Virginia, and their employees, agents, and representatives, from liability for any and all claims or legal action arising from any actions that the Department or the Commonwealth Virginia may take related to the collection of information from the any individual or person and the use of that information in connection with investigating and processing the application for a Principal/Key Manager Supplier Permit.

_____	_____
Signature of Individual Completing Form	Date
_____	_____
Printed Name	Title

### NOTARY PUBLIC

The undersigned, a Notary Public in and for the County of \_\_\_\_\_, in the State of \_\_\_\_\_, certifies that the above-named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and to which witness my hand and seal.

Notary Public	_____
<b>Stamp or Seal</b>	_____
	Printed Name

My commission expires \_\_\_\_\_, 20\_\_\_\_\_

**APPENDIX – REQUIRED NOTARIZED FORMS**

**PRINCIPAL ENTITY**

**PAGES 25 TO 26**







### AFFIDAVIT OF REPRESENTATIVE OF PRINCIPAL ENTITY

I, \_\_\_\_\_ (printed name), am authorized to complete and execute this Principal Entity Disclosure Form on behalf of \_\_\_\_\_ (printed name of Principal Entity). I am also authorized to provide all of the information requested on this Form to the Department, its employees, agents, and vendors (collectively, "the Department"), and to make the representations set forth in this Affidavit.

I have read, and understand, every page of this Form. To the best of my knowledge, information, and belief, the information that I have provided on, or attached to, this form is accurate, complete, and not misleading. I understand that any misrepresentation or omission may lead to the delay or denial of an application for a gaming license or permit, or may result in the Department imposing sanctions against the applicant, up to and including revocation of its license if it has been issued a license. I understand that any misrepresentation or omission on this Disclosure Form may also subject me, or the principal entity that I represent, to civil or criminal liability.

By a separate Authorization for Release of Information, I am authorizing any entity or individual that has information about the Principal Entity to release that information to the Department for purposes of its investigation of an applicant for a principal entity license.

On behalf of the Principal Entity and its successors and assigns, I expressly waive, release, discharge, and forever hold harmless and agree to indemnify, the Department, the Commonwealth of Virginia, and their employees, agents, and representatives, from liability for any and all claims or legal action arising from any actions that the Department or the Commonwealth of Virginia may take related to the collection of information from the Principal Entity and the use of that information in connection with investigating an Principal Entity.

\_\_\_\_\_  
SIGNATURE OF AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME OF AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
TITLE

### NOTARY PUBLIC

The undersigned, a Notary Public in and for the County of \_\_\_\_\_, in the State of \_\_\_\_\_, certifies that the above-named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and to which witness my hand and seal.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Printed Name

**Stamp or Seal**

My commission expires \_\_\_\_\_, 20\_\_\_\_

**APPENDIX – REQUIRED NOTARIZED FORMS**

**SERVICE PERMIT  
GAMING EMPLOYEE APPLICANTS**

**PAGES 28**



**APPENDIX – REQUIRED NOTARIZED FORMS**

**INSTITUTIONAL INVESTOR  
WAIVER APPLICANTS**

**PAGES 30 - 31**



### AUTHORIZATION FOR RELEASE OF INFORMATION

**TO:** \_\_\_\_\_

**FROM:** \_\_\_\_\_  
(Printed Name of Institutional Investor Entity or Individual)

I am, or represent an Institutional Investor applying for a waiver in the Commonwealth of Virginia.

The Virginia Lottery "Department" is required by law to conduct an investigation of an Applicant for a Operator License or Supplier Permit. That investigation requires the Department to collect and evaluate information about the above individual or entity that I represent. As such, I irrevocably give consent to the Department, and persons authorized by the Department, to: (1) verify all information provided in the waiver application form and supporting documents; and (2) have access to any and all information that the above individual or entity has provided to any other jurisdiction seeking a gaming license in that jurisdiction, as well as the information obtained by that other jurisdiction during the course of any investigation that it may have conducted regarding the above individual or entity.

By executing this Authorization, I authorize any of the following entities to release to the Department any and all information about the entity that the Department requests: local, State or federal government unit; commercial or business enterprise; non-profit entity; individual; or any other public or private entity. The requested information may be released in written, verbal, electronic, or any other form.

With respect to any claims or liability arising from the release of the requested information to the Department, on behalf of the individual or entity, I expressly waive, release, discharge and forever hold harmless and agree to indemnify, the unit, entity, or individual that releases information to the Department under the authority of this Authorization. Photo, facsimile, or electronic copy of this signed and dated Authorization shall be equally effective as an original.

\_\_\_\_\_  
Signature of Individual Completing Form

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

### NOTARY PUBLIC

The undersigned, a Notary Public in and for the County of \_\_\_\_\_, in the State of \_\_\_\_\_, certifies that the above named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and to which witness my hand and seal.

\_\_\_\_\_  
Notary Public

**Stamp or Seal**

\_\_\_\_\_  
Printed Name

My commission expires \_\_\_\_\_, 20\_\_\_\_



### AUTHORIZATION FOR RELEASE OF INFORMATION

**TO:** \_\_\_\_\_

**FROM:** \_\_\_\_\_  
(Printed Name of Institutional Investor Entity or Individual)

I am, or represent an Institutional Investor applying for a waiver in the Commonwealth of Virginia.

The Virginia Lottery "Department" is required by law to conduct an investigation of an Applicant for a Operator License or Supplier Permit. That investigation requires the Department to collect and evaluate information about the above individual or entity that I represent. As such, I irrevocably give consent to the Department, and persons authorized by the Department, to: (1) verify all information provided in the waiver application form and supporting documents; and (2) have access to any and all information that the above individual or entity has provided to any other jurisdiction seeking a gaming license in that jurisdiction, as well as the information obtained by that other jurisdiction during the course of any investigation that it may have conducted regarding the above individual or entity.

By executing this Authorization, I authorize any of the following entities to release to the Department any and all information about the entity that the Department requests: local, State or federal government unit; commercial or business enterprise; non-profit entity; individual; or any other public or private entity. The requested information may be released in written, verbal, electronic, or any other form.

With respect to any claims or liability arising from the release of the requested information to the Department, on behalf of the individual or entity, I expressly waive, release, discharge and forever hold harmless and agree to indemnify, the unit, entity, or individual that releases information to the Department under the authority of this Authorization. Photo, facsimile, or electronic copy of this signed and dated Authorization shall be equally effective as an original.

\_\_\_\_\_  
Signature of Individual Completing Form

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

### NOTARY PUBLIC

The undersigned, a Notary Public in and for the County of \_\_\_\_\_, in the State of \_\_\_\_\_, certifies that the above named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and to which witness my hand and seal.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Printed Name

**Stamp or Seal**

My commission expires \_\_\_\_\_, 20\_\_\_\_

**CERTIFICATION OF BUSINESS RELATIONSHIP**

**CASINO FACILITY OPERATOR:** \_\_\_\_\_

**APPLICANT:** \_\_\_\_\_  
(Applicant's Printed Name)

I, \_\_\_\_\_ (printed name), am authorized to complete and execute Business Agreements on behalf of \_\_\_\_\_ (Facility Operator). The applicant stated above has entered an agreement/contract to provide Gaming related goods or services to this facility operator or supplier. The applicant will provide the following Gaming related goods and/or services to this facility operator or supplier (describe in detail the goods and/or services to be provided:

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\_\_\_\_\_  
Signature of Facility Operator Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

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***NOTARY PUBLIC***

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The undersigned, a Notary Public in and for the County of \_\_\_\_\_, in the State of \_\_\_\_\_, certifies that the above-named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and to which witness my hand and seal.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Printed Name

**Stamp or Seal**

My commission expires \_\_\_\_\_, 20\_\_\_\_



**CERTIFICATION OF BUSINESS RELATIONSHIP**

**SUPPLIER ENTITY :** \_\_\_\_\_

**APPLICANT:** \_\_\_\_\_

(Applicant's Printed Name)

I, \_\_\_\_\_ (printed name), am authorized to complete and execute Business Agreements on behalf of \_\_\_\_\_ (Supplier permit holder). The applicant stated above has entered an agreement/contract to provide Gaming related goods or services to this facility operator or supplier.

The applicant will provide the following Gaming related goods and/or services to this facility operator or supplier (describe in detail the goods and/or services to be provided:

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\_\_\_\_\_  
Signature of Supplier Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

***NOTARY PUBLIC***

The undersigned, a Notary Public in and for the County of \_\_\_\_\_, in the State of \_\_\_\_\_, certifies that the above-named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and to which witness my hand and seal.

\_\_\_\_\_  
Notary Public

**Stamp or Seal**

\_\_\_\_\_  
Printed Name

My commission expires \_\_\_\_\_, 20\_\_\_\_

### CERTIFICATION OF BUSINESS RELATIONSHIP

**CASINO LICENSEE:** \_\_\_\_\_

**APPLICANT:** \_\_\_\_\_  
(Applicant's Printed Name)

I, \_\_\_\_\_ (printed name), am authorized to complete and execute Business Agreements on behalf of \_\_\_\_\_ (Casino Licensee Name). The applicant listed above has received at least a conditional offer of employment from the Licensee. The Applicant will have the following job description:

\_\_\_\_\_  
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\_\_\_\_\_

\_\_\_\_\_  
Signature of Casino Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

### NOTARY

The undersigned, a Notary Public in and for the County of \_\_\_\_\_ in the State of \_\_\_\_\_ certifies that the above named individual appeared in person, and before me, either known to me or satisfactorily proven to be the individual whose name subscribed to the within instrument and signed the Authorization and Notification.

This \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_ and to which witness my hand and seal.

**Stamp or Seal**

\_\_\_\_\_  
Notary Public  
\_\_\_\_\_  
Printed Name

My Commission expires \_\_\_\_\_, 20\_\_

# **APPENDIX**

## **REQUIRED SUPPORTING DOCUMENTS**

## REQUIRED DOCUMENTS for CASINO FACILITY OPERATOR

Appendices are attachments you are to provide or create and do not contain corresponding questions, exhibits or charts. Each document provided as an appendix shall be uploaded into the online licensing system. If an appendix is not applicable, indicate “**Not Applicable**” and **state why it is not applicable**. All information shall be provided **in addition** to the exhibits that are to be provided.

Appendix	Appendix Description	X IF ATTACHED (ALL FORMS ARE MANDATORY)
1	Description of all bonus, profit sharing, pension, retirement, deferred compensation and similar plans.	Submit any changes since the submission of the sports betting. If none, select N/A.
2	Description of long-term debt for Applicant and for the holding, intermediary, subsidiary, affiliate, and any other type of business entity of Applicants. Provide this information in addition to both Exhibit 9 & 10.	This should be updated with any long-term debt that the has been acquired since the submission of the sports betting application, especially as it relates to casino related debt that may have occurred.
3	Description of other indebtedness and security devices for Applicant and for the holding, intermediary, subsidiary, affiliate, and any other type of business entity of Applicants. Provide this information in addition to both Exhibit 11 & 12.	Submit any changes since the submission of the sports betting. If none, select N/A.
4	Description of Security Options for Applicant and for the holding, intermediary, subsidiary, affiliate, and any other type of business entity of Applicants. Provide this information in addition to both Exhibit 13 & 14.	Submit any changes since the submission of the sports betting. If none, select N/A.
5	Description of Existing Litigation. Description of any settled or closed litigation against the Applicant for the past five (5) years. Also describe any existing or settled or closed litigation for the past five (5) years for any holding, intermediary, subsidiary or affiliate. A description of any judgments against Applicant, holding, intermediary, subsidiary or affiliate for the past five (5) years. Describe if any judgments were covered by insurance and if so the insurance company. Provide this information in addition to both Exhibit 20 & 22.	Submit any changes since the submission of the sports betting. If none, select N/A.
6	Audited financial statements for the last five years for Applicant and Applicant’s holding, intermediary, subsidiary, affiliate, and any other type of business entity, including the last fiscal year. If audited financial statement do not exist, then provide unaudited financial statements.	This should be updated for any year-end audited financial statements that have been completed since the submission of the sports betting application.
7	Annual reports for the last five years for Applicant and for the holding, intermediary, subsidiary, affiliate, and any other type of business entity of Applicants.	This should be updated with any annual reports that have been issued since the submission of

**GAMING LICENSING PROCEDURES MANUAL**

for Casino Account Representatives

		the sports betting application.
8	Annual reports prepared on the SEC's form 10K for the last 5 years.	Any annual reports that have been issue since the submission of the sports betting application.
9	Complete copies of year to date internal financial statements for Applicant and for the holding, intermediary, subsidiary, affiliate, and any other type of business entity of Applicants. Include a list of all external accountants and provide a contact person and contact information.	Submit most recent year to date financial statement available, if not already submitted with the sports betting application.
10	Copy (ies) of any interim reports for Applicant and for the holding, intermediary, subsidiary, affiliate, and any other type of business entity of Applicants, including an index of all compliance, due diligence and audit investigations conducted during the past three years	Submit any updates since the submission of the sports betting application. If none, select N/A.
11	Minutes of Board of Directors meetings for the past five calendar years.	Submit for CY 2021
12	Minutes of Compliance, Audit, Executive and Compensation and Stock Option Committee meetings for the past five calendar years.	Submit for CY 2021

## **APPENDIX – REQUIRED DOCUMENTS for**

### **SUPPLIER PERMIT APPLICANTS (Manufacturer)**

- Virginia State Corporation Commission (SCC) Certificate of Good Standing;
- Copies of applicants' financial statements for most recent two year's Balance Sheet;
- Copies of applicants' financial statements for most recent two year's Profit and Loss Statement;
- Description of all bonus, profit sharing, pension, retirement, deferred compensation, and similar plans;
- Description of long-term debt for Applicant and for the holding, intermediary, subsidiary, affiliate, or any other type of business entity of applicant;
- Description of other indebtedness and security devices for applicant and for the holding, intermediary, subsidiary, affiliate, or any other type of business entity of applicant;
- Description of Security Options for Applicant and for the holding, intermediary, subsidiary, affiliate, and any other type of business entity of the applicant;
- Description of Existing Litigation. Description of any settled or closed litigation against the applicant for the past five (5) years. Description of any existing or settled or closed litigation for the past five (5) years for any holding, intermediary, subsidiary or affiliate. A description of any judgements against the applicant, holding, intermediary, subsidiary or affiliate for the past five (5) years. Describe if any judgements were covered by insurance and if so the insurance company;
- Audited financial statements for the last five years for applicant and applicant holding, intermediary, subsidiary, affiliate, and any other type of business entity, including the last fiscal year. If audited financial statements do not exist, then provide unaudited financial statements;
- Annual reports for the last five years for applicant and holding intermediary, subsidiary, affiliate, and any other type of business entity of applicants;
- Annual reports prepared on SECs form 10K for the last five (5) years;
- Complete copies of year to date internal financial statements for Applicant and for the holding, intermediary, subsidiary, affiliate, and any other type of business entity of applicant. Include a list of all external accountants and provide a contact person and contact information;
- Copy of any interim report for Applicant and for the holding, intermediary, subsidiary, affiliate, and any other type of business entity of applicants, including an index of all compliance, due diligence and audit investigations conducted during the past three years;
- Minutes of the Board of Directors meetings for the past five calendar years;
- Minutes of Compliance, Audit, Executive Compensation and Stock Option Committee meetings for the past five calendar years;
- Copy of the last definitive proxy or information statement (SEC);

## **APPENDIX – REQUIRED DOCUMENTS for**

### **SUPPLIER PERMIT APPLICANTS (Manufacturer)**

- Copy of all registration statements for the last five years filed in accordance with the Securities Act of 1933;
- Copy of all other reports prepared in the last five (5) years by independent auditors for the applicant and for the holding, intermediary, subsidiary, affiliate, and any other type of business entity of the applicant;
- Certified copies of the Articles of Incorporation, Charter and By-Laws and all amendments for the applicant and for the holding, intermediary, subsidiary, affiliate, and any other type of business entity of the applicants;
- Current ownership table of organization for the applicant;
- Current organizational chart for all holding, intermediaries, subsidiaries, affiliates, or any other type of business entity of the applicant;
- Functional table of organization for the applicant filing this form, job description and names of employees earning more than \$250,000;
- Copies of 1120 forms and 941 Forms filed with the IRS in the last five (5) years;
- Copies of IRS 5500 forms filed in the last five (5) years;
- Provide a chart of all gaming jurisdictions where the entities conduct gaming business, including the initial licensing, subsequent renewal dates and current license status;
- Provide a chart of existing vendors including the name, address, phone and tax identification number of the vendor, type of goods and/or services provided by the vendor, total amount of business with the vendor in the past twenty-four (24) months;
- Details of planned, committed, and un-committed future capital expenditures. Also include any documents relating to securing funding to the project in Virginia;
- Schedule of insurance policies currently in effect, including deductibles and policy limits and any self-insurance retentions; and
- Provide the nature and results of any other material reorganization, readjustment, or success of the applicant, holding, intermediary, subsidiary or affiliate. Also describe the acquisition or disposition of any material amount of assets otherwise than in the normal course of business and any material change in the way business was conducted by the applicant, holding, intermediary, subsidiary or affiliate because of such proceeding.
- Any Power Point presentations, slide shows and/or charts or graphs used for presentations before gaming regulatory agencies or for securing financing relating to sports betting operations in the past two years;
- If available, a copy of the business/strategy plan for the next three years as it relates to investment in Virginia;

**APPENDIX - REQUIRED DOCUMENTS for**

**SUPPLIER PERMIT APPLICANTS (Manufacturer)**

- For the Internal Audit Department, identify the structure of the Department and provide an index of reviews conducted and copies of all reports for the past three years;
- Provide tax compliance history, including details of any audits or investigations into the entity's tax affairs which have been conducted by the relevant authorities during the past three years. List the conclusion of the investigations and provide any related correspondence;
- A letter from the bank listing all bank accounts, indicating the balance for each account with a list of authorized signatures;
- Provide information as to any material lease agreements entered by any entity on the Ownership/Org Chart. Provide documentation to verify real estate ownership or leases, including related documents.



## **APPENDIX – REQUIRED DOCUMENTS for**

### **SUPPLIER PERMIT APPLICANTS (Contractor)**

- Applicant's Contract or Written Agreement with A Casino Facility;
- Director, Partner, Officer or Trustee completed Authorization for Release of Information Form (Publicly Traded Companies only)
- Certification of Business Relationship form notarized;
- Financial Statements for The Past Two Years;
- Certified copies of all charters, articles of incorporation, by-laws, articles of organization, operating agreements, partnership agreements, trust agreements or other similar documents of the Applicant, including all amendments;
- The most recent annual report of the Applicant that was submitted to shareholders, partners, members or other persons and meeting minutes from the last 12 months;
- Proof of Registration with the Virginia State Corporation Commission (VCC). (Certificate of Good Standing);
- The most recent annual report(s) filed with the Secretary of State or similar official for all states in which the Applicant conducts business;
- A corporation that is a registrant under the Securities Act of 1933 or the Securities Exchange Act of 1934 shall submit a copy of the two most recent annual reports prepared on Form 10K;
- A corporation that is a registrant with the Securities and Exchange Commission (SEC) shall submit a copy of the Form 10Q for the last two filings;
- A corporation that is a registrant with the SEC shall submit a copy of the most recent Form 8K filed with the SEC if filed after the latest 10K filing;
- A flowchart illustrating the fully diluted ownership of the Applicant. List all parent, subsidiary or intermediary companies until the flowchart reflects 100% of the stock, partnership, membership, or ownership interest as being held by an individual(s) and no other legal persons. If the ultimate parent company is publicly traded and no natural person controls more than 5% of the publicly traded stock, indicate that in a footnote to the flowchart;
- A chart showing the corporate structure of the Applicant;
- An organizational chart identifying all officers, directors, managers, managing members, partners, and key/managerial employees of the Applicant. Include position descriptions and the names of persons holding such positions;
- All U. S. Corporate Income Tax Returns, or all U. S. Partnership Returns, or personal tax returns and state business or personal tax returns for the past three years. Include all amended returns, exhibits and attachments to tax returns;
- A list of all IRS 1099 recipients for the past year,

## APPENDIX – REQUIRED DOCUMENTS for

### SUPPLIER PERMIT APPLICANTS (Principal and Key Manager)

- Copy of Birth Certificate;
- Copy of Social Security Card;
- Copy of Naturalization Certificate, if applicable;
- Copy of front and back of Permanent Resident Card, Work Visa (H1B, H2B, TN1etc.), if applicable;
- Copy of Passport, if applicable;
- Copy of front and back of Driver’s License or State ID Card;
- Copy of Driving Records from any State in which the applicant is licensed;
- Copy of High School Diploma, an official high school transcript, or a copy of a G.E.D certificate;
- Certified copy of college transcripts from all colleges and universities attended. Transcripts must be received directly from the Institution either through the mail or email. Transcripts can be mailed to the Virginia Lottery, Licensing and Investigations Division, 600 East Main Street, Richmond, VA 23219 or emailed to [gaminglicensing@valottery.com](mailto:gaminglicensing@valottery.com);
- Copy of applicant’s military DD214 OR National Guard NGB 22, if applicable;
- Request for military records, Form 180 (<https://www.archives.gov/veterans/military-service-records/standard-form-180.html>), completed and signed, if applicable, (Original documents, mail only);
- Copy of any professional license(s) held and documents related to any sanctions;
- Copy of any gaming licenses the applicant holds or has held in the and documents related to any sanctions, fines, or penalties;
- Copy of registration for any vehicles, aircrafts, or boats;
- Copy of each tax return (Federal, State and Local), each Internal Revenue Service forms filed with or concerning that tax return and all Internal Revenue Service schedules filed by the applicant in the last five (5) years. If applicant and spouse did not file joint returns at any time in the last five (5) years, provide a copy of the spouse’s tax return;
- Letter from each bank on their stationary relative to attesting to all accounts the applicants have signatory authority;
- Copy of the last bank statement on all bank accounts which you have signatory authority listed on the net worth statement, schedule (A), and the last brokerage statement for all securities listed on the net worth statement, schedule (C);
- Copy of any Notes Receivable (including receivables in the name of a corporation in which the applicant has over a 5% interest listed on net worth statement, schedule (B));

## **APPENDIX - REQUIRED DOCUMENTS for**

### **SUPPLIER PERMIT APPLICANTS (Principal and Key Manager)**

- Copies of mortgage statements for the last three (3) months, documents, and settlement sheets for all real estate properties in which you have an interest. Documentation supporting the fair market value of all real estate listed on the networth statement, schedule (D), and outstanding amounts owed on mortgages and lien amounts on real estate listed on the net worth statement, schedule (L);
- Copy of any Life Insurance Policies that have a cash value and the name(s) of all beneficiaries, reference schedule (E) on the net worth statement;
- Copy of the last statement relative to all retirement/investment/pension funds, including, but not limited to, 401K retirement programs listed on the net worth statement, schedule (F);
- Copy of any documents indicating ownership of any assets not listed above, such as ownership documents for aircraft, vehicles or boats listed on the net worth statement, schedule (G) and (H);
- Copy of any Notes, Loans or Taxes Payable (including payables in the name of a corporation in which the applicant has over a 5% interest) listed on your net worth statement, schedules (I), (J), (K), (M), or (N);
- Copy of any documents relative to any Contingent Liabilities listed on the networth statement, schedule (O);
- Copy of last three (3) months credit card statements;
- Documentation (i.e., partnership papers, stock registry, stock certificates) of any company the applicant holds 5%;
- Copy of any documents including any indebtedness not listed above;
- Copy of any liens, judgements, or taxes payable under the applicant's name; and
- One or two paragraph summary of all litigation during the past fifteen years, which should include, docket number, court information regarding the cause of action, named litigants, copy of complaint, disposition, or current status, if pending.

## APPENDIX – REQUIRED DOCUMENTS BY LICENSE TYPE

### PRINCIPAL ENTITY APPLICANTS

- Virginia State Corporation Commission Certificate of Good Standing;
- Description of Existing Litigation;
- Audited financial statements for the last five years, including the Principal Entity's last fiscal year. If audit financial statements do not exist, then provide unaudited financial statements;
- Annual reports for the last five years;
- Description of Security Options;
- Description of any settled or closed litigation against the Principal Entity for the past five (5) years. Also describe any existing or settled or closed litigation for the past five (5) years for any holding company, intermediary subsidiary, or affiliate for the past five (5) years. Describe if any judgements were covered by insurance and if so, provide the name of the insurance company;
- Annual reports for the last five (5) years;
- Annual reports prepared on the SEC's Form 10K for the last five (5) years;
- A copy of the last quarterly unaudited financial statements;
- Copy(ies) of any interim reports including an index of all compliance, due diligence and audit investigations conducted during the past three years;
- A copy of the last definitive Proxy or information statement (SEC);
- A copy of all registration statements for the last five years filed in accordance with the Securities Act of 1933;
- Copies of all reports prepared in the last five years by independent auditors of the corporation;
- Certified copies of the Articles of Incorporation, Charter and By-laws, and all amendments and proposed amendments;
- Current ownership table of organization;
- Copies of 1120 forms and 941 forms filed with the IRS in the last five years;
- Copies of IRS 5500 form filed in the last 5 years;
- If Principal Entity has held a gaming license in another jurisdiction provide a letter of reference from the gaming enforcement or regulatory agency that specifies the experience of the agency with the Principle Entity and its associates and gaming operation;
- Provide a chart of existing vendors including the name, address, phone and tax identification number of the vendor, type of good and/or services provided by the vendor, total amount of business with the vendor in the past twenty-four (24) months; and
- Provide the nature and results of any other material reorganization, readjustment, or success of the Principal Entity, holding, intermediary, subsidiary or affiliate. Describe the acquisition or disposition of any material amount of assets otherwise in the normal course of business and any material change in the way business was conducted by the Principal Entity, holding company, intermediary, subsidiary or affiliate because of such event.

## APPENDIX – REQUIRED DOCUMENTS for

### INSTITUTIONAL INVESTOR APPLICANTS

- Securities information;
- Explanation of how the applicant meets definition of “Institutional Investor”;
- A list of the names, social security numbers, tax identification numbers, titles, addresses, and telephone numbers of all of the Institutional Investor's officers, directors or their equivalent, and any other person that has direct control over, or the power to direct or control, the investment securities;
- The names, social security numbers, tax identification numbers, titles, addresses, and telephone numbers of each person or entity who has a greater than 5% interest in the Institutional Investor's voting securities (5% if the Institutional Investor is publicly traded);
- A list of all the Institutional Investor's affiliates that have a greater than 5% interest in the Institutional Investor;
- A list of all equity securities of the person in which the Institutional Investor has acquired an interest subject to this waiver application that are, or were, directly or indirectly, beneficially owned by the Institutional Investor or its affiliates within the preceding one-year period. This list must set forth a description of the securities, amount of the securities, and the date of the acquisition or sale, or both;
- A list of all regulatory agencies with which the Institutional Investor or any affiliate files periodic reports and the point-of-contact information for each of these agencies;
- A copy of any filing under 15 USC § 18a with respect to the acquisition or proposed acquisition;
- A current certificate from any regulatory agency related to the conduct of the Institutional Investor's activities, certifying that the Institutional Investor is authorized to conduct the investment activities and is in good standing;
- State whether the Institutional Investor, its affiliates, or any current officer or director, or any former officer or director whose tenure ended within the preceding 12 months, has been subject to criminal charges or regulatory sanctions imposed during the preceding 10 years. Regarding any former officers or directors, such information must be provided only to the extent that it relates to criminal charges or regulatory sanctions imposed during such person's tenure with the Institutional Investor or its affiliates;
- State whether there have been any administrative or court proceedings filed by any regulatory agency during the preceding five years against the Institutional Investor, its affiliates, and any current officer or director, or any former officer or director whose tenure ended within the preceding 12 months. As to a former officer or director, such information must be provided only to the extent that it relates to actions arising during such person's tenure with the Institutional Investor or its affiliates;
- State whether the Applicant has ever had a gaming license denied, restricted, suspended, revoked, or not renewed by any gaming jurisdiction;
- State whether the Institutional Investor obtained funds from another source for purposes of financing the acquisition of the securities involved in this transaction. If so, identify the source and amount of funds.