REDACTED

Arizona Form 833

Application for Bingo License

- Type or print in black ink and complete all information requested on this form. If you do not, your application will be returned. All information is subject to verification. If you need more space, attach additional sheets.
- All bingo licenses expire one year from the date of issue. To continue conducting live bingo games, you must renew your license prior to the expiration date pursuant to A.R.S. §§ 5-403(C) and 5-410.

1 Applicants Name	Programme and a second programme for the programme and the program					
22 Meling Address 725 W. Apache Trail #2A 28 21P Code Apache Junction AZ 85120 38 Administrative Office Location 725 W. Apache Junction AZ 85120 38 Administrative Office Location 725 W. Apache Junction AZ 85120 48 Name of Contact Person 4b Telephone No. Aga McWhorter (928) 444-6480 46 E-mail Address 4c Fax No.	Applicant's Name Jay Alan McWhorter				A VI a transport of the party o	
22 City State ZIP Code Apache Junction AZ 85120 3a Administrative Office Location 725 W. Apache Junction Apache Junction Apache Junction AZ 85120 Apache Junction Apache J	2a Mailing Address					
State ZIP Code AZ	_				constitutes a Cla	ass 6 felony.
36 Administrative Office Location 725 W, Apache Trail #2A 36 City State ZIP Code Apache Junction AZ 85120 Ala Name of Contact Person Ab New Yellow State ZIP Code Apache Junction AZ 85120 Ala Name of Contact Person Ab Telephone No. AD 45 Helephone No. AD 46 E-mail Address Ac Fax No. 81 PM 80 RCVD 81 PM 80 RCVD 81 PM 80 RCVD 82 PM 82 PM 80 RCVD 83 PM 80 RCVD 84 PM 80 RCVD 85 PM 80 RCVD 85 PM 80 RCVD 85 PM 80 RCVD 86 PM 80 RCVD 86 PM 80 RCVD 87 PM 80 RCVD 88 PM 80 RCVD 88 PM 80 RCVD 88 PM 80 RCVD 88 PM 80 RCVD 87 PM 80 RCVD 88 PM 80 RCVD 89 PM 80 RCVD 89 PM 80 RCVD 89 PM 80 RCVD 80 RCVD			State	ZIP Code	REVENUE USE ONLY. DO I	NOT MARK IN THIS AREA.
3a Administrative Office Location 725 W. Apache Trail #2A 3b City Apache Junction AZ 85120 Ala Name of Contact Person Jay McWhorter (928) 444-6480 46 E-mail Address (928) 444-6480 46 E-mail Address (928) 444-6480 47 E Fax No. [8] PM [8]	Apache Junction		AZ	85120	88	
State ZIP Code Apache Junction AZ 85120 4b Telephone No.					7	
State ZIP Code Apache Junction AZ 85120 4b Telephone No.	725 W. Apache Trail #2A					
4a Name of Contact Person 4b Telephone No. (928) 444-6480 (928) 44			State	ZIP Code	7	
Jay McWhorter (928) 444-6480 46 E-mail Address tumbleweed85120@gmail.com 5 Class B and Class C license applicants only: If applying as a qualified organization, check one box to indicate the typogranization: Charitable	Apache Junction		AZ	85120	_[
tumbleweed85120@gmail.com 4e Fax No. Sel PM Sel RCVD	4a Name of Contact Person		4b Telepi	hone No.		
Class B and Class C license applicants only: If applying as a qualified organization, check one box to indicate the typorganization: Charitable						
5 Class B and Class C license applicants only: If applying as a qualified organization, check one box to indicate the type organization: Charitable			4c Fax N	lo.	81 PM	80 RCVD
organization: Charitable	tumbleweed85120@gmail.com					
6b Auxiliary Name Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code City State ZIP Code 7 Class B and Class C license applicants only applying as a qualified organization, list the current officers or Board Directors of the organization: 7a Name 7b Name Title Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code City State ZIP Code 7c Name Title Address – Number and Street, Rural Rt., Apt. No. Address – Number and Street, Rural Rt., Apt. No. Title Address – Number and Street, Rural Rt., Apt. No. Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code 7d Name Title Address – Number and Street, Rural Rt., Apt. No. Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code 6 City State ZIP Code 8 Class B and Class C license applicants only: Bingo checking account information:	☐ Charitable ☐ S ☐ Fraternal ☐ \	olunteer Fire De		☐ Homeowners A	ssociation Nonprofi	t Ambulance Service
Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code City State ZIP Code 7 Class B and Class C license applicants only applying as a qualified organization, list the current officers or Board Directors of the organization: 7a Name 7b Name Title Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code City State ZIP Code 7c Name 7d Name Title Title Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code 7d Name Title Title Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code 7d Name Title Title Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code 8 Class B and Class C license applicants only: Bingo checking account information:	¢***					
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7 Class B and Class C license applicants only applying as a qualified organization, list the current officers or Board Directors of the organization: 7a Name Title Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code City State ZIP Code Title Address – Number and Street, Rural Rt., Apt. No. Title Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code Title Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code City State ZIP Code State ZIP Code	Address - Number and Street, Rura	l Rt., Apt. No.		Address – Numbe	er and Street, Rural Rt., Apt. N	0.
Directors of the organization: Ta Name	City	State ZIP	Code	City	State	ZIP Code
Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code City State ZIP Code 7c Name 7d Name Title Title Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code City State ZIP Code Title Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code City State ZIP Code 8 Class B and Class C license applicants only: Bingo checking account information:	Directors of the organization:	applicants only	/ applying		nization, <i>list the current</i>	officers or Board of
City State ZIP Code City State ZIP Code 7c Name 7d Name Title Title Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code City State ZIP Code 8 Class B and Class C license applicants only: Bingo checking account information:	Title			Title		
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7c Name 7d Name Title Title Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code City State ZIP Code 8 Class B and Class C license applicants only: Bingo checking account information:	Address – Number and Street, Rura	Rt., Apt. No.		Address – Numbe	er and Street, Rural Rt., Apt. N	0.
Title Address – Number and Street, Rural Rt., Apt. No. City State ZIP Code 8 Class B and Class C license applicants only: Bingo checking account information:	City	State ZIP	Code	City	State	ZIP Code
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City State ZIP Code City State ZIP Code 8 Class B and Class C license applicants only: Bingo checking account information:	Title			Title		
8 Class B and Class C license applicants only: Bingo checking account information:	Address – Number and Street, Rura	Rt., Apt. No.		Address – Numbe	er and Street, Rural Rt., Apt. No	D
	City	State ZIP	Code	City	State	ZIP Code
Checking Account Number Dank INSITE Dank Branch		plicants only:	Bingo chec	king account informa		
	Checking Account Number	рапк мате			Dalik Dialicil	

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[A	E-W-N-N-W-(
	icant's Name (as shown on page 1)			
Jay	Alan McWhorter			APPLICATION FOR BINGO LICENSI
9	Class B and Class C license app	icants only: Bingo into	<u>erest-bearing</u> account i	nformation:
	Account Number	Bank Name		Bank Branch
10	Class B and Class C license appl	icants only: List all of	ficers and/or supervi	sors authorized to sign checks from the account
	listed above. If applying as a qualif			
	10a Name	3	10b Name	
	Title		Title	
	THIS		1,,,,,,	
44	List the name/s) of the one or two	nercone who will serv	o as managers. If an	olying as a qualified organization, these person
• • • • • • • • • • • • • • • • • • • •	must be members of the applicant			siying do a qualifica organization, tribab porodit
	11a Name	. Lauri person must su	11b Name	
			1	•
	Jay McWhorter Title		Teresa Higgin	5
			Owner	
	Owner		Owner	
40	List the name of the are person do	rianatad as prospede a	cordinator If applying	as a qualified organization, this person must be
12	an officer or director and a memb			
		er of the applicant. Ea	Title	an amgavit.
	Name			
	Teresa Higgins		Owner	
40	List the manage) of the manage(s) w	the will some so supply	nicer If emploing as a	qualified organization, each person must be a
13				nes are required, please attach affidavits.
		SON MUSI SUDMIL AN AM	13b Name	les are required, please attacir amdavits.
	13a Name		1,	
	Jay McWhorter		Teresa Higgin	S
	Title		Title	
	Owner		Owner	
4.4	150.00	to a sufficiency of a sector		availfied amonization and norman must be
14				qualified organization, each person must be a
	member or new member of the ap	plicant. Except for Cla	iss A licensees, each j	person must submit an amdavit.
	14a Name		14b Name	
	Lisa McWhorter			
	14c Name		14d Name	
		7 8 7		
15	Street address of the PHYSICAL lo			
	725 W. Apache Trail #2A, Apacl	ne Junction, AZ 8512	0	
16				respective day that live bingo will be played
	SUN MON	TUE	WED T	HUR FRI SAT
	□a.m. □a.m	. □a,m.	□a.m.	□a.m. □a.m. □a.m.
			5:00 ⊠ p.m. 5:00	p.mp.m. 1:00p.m.
		ALE VIIII		

Continued on page 3 ->

Applicant's	Name (as shown on page 1)			
Jay Alan	McWhorter		APPLICATION FO	R BINGO LICENS
	ate the type of premises where bingo will be play			
a L	Therefore the morning age will be paid non bill	go 101103.		
b 🗵	Rented or leased. Attach rental affidavit and co			
	Landlord's Name	Address – Number and	Street, Rural Rt., Apt. No.	D.
	Gus Kuhn	City	State	ZIP Code
	Telephone Number (with area code)	City Riverside	CA	92503
c [Owned solely by the organization. Attach colorber related document: [Holder of Mortgage]		rchase agreement, es	
	Troder or mongage	71001000		
	Telephone Number (with area code)	City	State	ZIP Code
	Telephone Number (with area code) Co-Owner Holder:	City	Street, Rural Rt., Apt. No State Street, Rural Rt., Apt. No	ZIP Code
	Telephone Number (with area code)	City	State	ZIP Code
	3) Co-Owner Holder:	Address - Number and	Street, Rural Rt., Apt. No),
	Telephone Number (with area code)	City	State	ZIP Code
	Ingo licensees who are or will be conducting bir fyour premises:	ngo in the same premises as you	and those licensees le	ocated within 1,000
18a N		18b Name		
Addre	ss - Number and Street, Rural Rt., Apt. No.	Address – Number and S	treet, Rural Rt., Apt. No.	
City	State ZIP Code	City	State	ZIP Code
			Coni	tinued on page 4 →

TY CLERK'S OFFICE MAY 9 '23 PM2:21

<u>Alan r</u>	Name (as shown on McWhorter	page 1)			APPLICATION FOR	R BINGO LICE
Exped	cted bingo expense	es:				
a Mo	ortgage:	\$, per month			
P	ayable to			Address - Number	and Street, Rural Rt., Apt. No).
Te	elephone number (wi	th area code)		City	State	ZIP Code
b Re	ent:	\$ <u>7</u> ,923.30	, per ⊠ month [hour ccasion		
	ayable to			Address - Number	and Street, Rural Rt., Apt. No).
	lus Kuhn elephone number (wi	th osop anda)		City	State	ZIP Code
l le	siephone number (wi	in area code)		Riverside	CA	92503
c Ja	initorial Services:	\$ ₁	, per 🗖 month (hour occasion		
Pa	ayable to			Address - Number	and Street, Rural Rt., Apt. No),
Te	elephone number (wi	th area code)		City	State	ZIP Code
	ccounting Services	: \$	per month	hour ccasion	and Street, Rural Rt., Apt. No	,
Te	elephone number (wil	h area code)		City	State	ZIP Code
ـــــــ						
	ecurity Services:	\$	per month	hour occasion		
D.	ayable to			Address - Number	and Street, Rural Rt., Apt. No	•
	elephone number (wit	h area code)		City	State	ZIP Code
	elephone number (wit	h area code)		City	State	ZIP Code
Te Bir	ngo Supplies:	th area code)	per <u>year</u>			,
f Bir	ngo Supplies:	\$ <u>1,500.00</u>	per <u>year</u>	Address Number a	and Street, Rural Rt., Apt. No	,
f Bir	ngo Supplies: ayable to actus Bingo Sup	\$ <u>1,500.00</u>	per <u>year</u>	Address – Number a	and Street, Rural Rt., Apt. No Rd. Suite 15	
f Bir Pa Ca Te	ngo Supplies: ayable to actus Bingo Sup lephone number (wit	\$ <u>1,500.00</u>	per <u>year</u>	Address Number a	and Street, Rural Rt., Apt. No	,
f Bir Pa	ngo Supplies: ayable to actus Bingo Sup elephone number (wit 502) 268-2848	\$ <u>_1,500.00</u> ply th area code)		Address - Number a 3210 E. Roeser City Phoenix	and Street, Rural Rt., Apt. No Rd. Suite 15 State AZ	ZIP Code 85040
f Bir Pa Ca Tel (6)	ngo Supplies: ayable to actus Bingo Sup elephone number (wit 502) 268-2848	\$ <u>_1,500.00</u> ply th area code)		Address - Number a 3210 E. Roeser City Phoenix	and Street, Rural Rt., Apt. No Rd. Suite 15 State	ZIP Code 85040

Continued on page 5 →

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Applicant's Name (as shown on p	page 1)			
Jay Alan McWhorter			APPLICAT	TION FOR BINGO LICENSI
1, Jay A. McWhorter and file this application. The all information provided has	ereby swear or confin		ing application and know t	he contents thereof and that
APPLICANTS SIGNATURE		4-5-23 O	wner	
		Please mail to: izona Department of Rev V Monroe Street, Division Phoenix, AZ 85007		
		5 (602) 716-7801		
		THOT ONLY DO NOT HADY II	THIS AREA	
	REVENUL	E USE ONLY, DO NOT MARK IN	TITTO AIGEA.	
☐ Approved ☐	Disapproved		Class B License	Class C License

Arizona Form 830

Affidavit

Bingo

This affidavit must be completed by each person who wishes to assist in the conduct of any game of bingo. If any information is blank or incorrect, the affidavit will be returned to you. All information is subject to verification. Disclosure of your Social Security Number (SSN) is voluntary. This information may be used to establish positive identification for purposes of criminal background checks pursuant to A.R.S. § 5-404.

Licensee's Name	License Number			
Jay Alan McWhorter				
Position (check the appropriate boxes):				
Manager	ed Coordinator 🔲	Assistant	1 1	O NOT MARK IN THIS AREA.
			88	
Affiant's Name			į l	
Jay Alan McWhorter	D-176:4			
Social Security Number	Date of Birth			
Address				
			H	
725 W Apache Trail #2A City	State	ZIP Code		
Apache Junction	AZ	85120	81 PM	80 RCVD
Home Phone No. (with area code)		No. (with area code)		
	(
If licensee is a qualified organization	on, complete the f	following section:		
Member?	Date Joined	Organization		
☐ Yes ☐ No	47.10.09			
Officers?	Officer Title			
Yes No				
Do you have an affidavit on file for any other				
☐ Yes ☐ No If "Yes", list license	e number(s):			
I, Jay Alan McWhorter and say that I will conduct or assist Statutes, Title 5, Chapter 4, and the any misdemeanor involving moral to for my participation in the conduct and understand the foregoing and whowledge.	in conducting all larules of the licensing arruptude or felony. of bingo games expressions are series of the conducting arrangement of the conduction of the conducting arrangement of the conduction of the conducting arrangement of the conduction of the conducting arrangement of the conduction of the conducting arrangement of the cond	bingo games in compliang authority. I am of good I have not and shall not accept as provided for by	moral character and have never receive any reward, compens law. I hereby swear or contade herein are true and correspondent	nse, Arizona Revised ver been convicted of sation or recompense firm that I have read
		4-5-23		
		Please mail to:		
	Arizona	Department of Rever	nue	

Phoenix, AZ 85007

1600 W Monroe Street, Division Code 22

(TY CLERK'S OFFICE MAY 9 '23 PM2:21

Arizona Form 830

Affidavit

Bingo

This affidavit must be completed by each person who wishes to assist in the conduct of any game of bingo. If any information is blank or incorrect, the affidavit will be returned to you. All information is subject to verification. Disclosure of your Social Security Number (SSN) is voluntary. This information may be used to establish positive identification for purposes of criminal background checks pursuant to A.R.S. § 5-404.

thay be ased to establish positive recharaction to	parpasso or ormini-			
Licensee's Name	License Number			
Jay A. McWhorter			_	
Position (check the appropriate boxes):	_			
Manager	ordinator	ant	REVENUE USE ONLY. DO	NOT MARK IN THIS AREA.
Affiant's Name				
Teresa Faye Higgins			<u> </u>	
Social Security Number Date of Birth				
ļ 			-	
Address				
City	State	ZIP Code	\dashv	
Apache Junction	AZ	85120	81 PM	80 RCVD
Home Phone No. (with area code)	Work Phone No. (with			00
l(
If licensee is a qualified organization, co	mplete the followi	ng section:		
Member?	Date Joined Organiz	ation		
Yes No	Marin Day A a	· V		
Officers?	Officer Title			
Yes No Do you have an affidavit on file for any other licer	1			
Yes No If "Yes", list license num				
L les L No II les , list licelise lidit	iber(s).			
I, Teresa Faye Higgins AFFIANT'S NAME and say that I will conduct or assist in co			under penalty of perjury,	
Statutes, Title 5, Chapter 4, and the rules				
any misdemeanor involving moral turpit	ide or felony. I hav	e not and shall not rece	ive any reward, compensa	tion or recompense
for my participation in the conduct of b				
and understand the foregoing and verify	that the information	n and statements made	herein are true and correc	t to the best of my
knowledge.				
		1/2		
		11/0		
	Si	gnature of Affiant		
		4-5-23		
	Da			
	Sancer I Language Areno III.			

Please mail to:
Arizona Department of Revenue
1600 W Monroe Street, Division Code 22
Phoenix, AZ 85007

1 (602) 716-7801

Arizona Form)
830	

Affidavit

Bingo

This affidavit must be completed by each person who wishes to assist in the conduct of any game of bingo. If any information is blank or incorrect, the affidavit will be returned to you. All information is subject to verification. Disclosure of your Social Security Number (SSN) is voluntary. This information may be used to establish positive identification for purposes of criminal background checks pursuant to A.R.S. § 5-404. License Number Licensee's Name Jay A. McWhorter Position (check the appropriate boxes): REVENUE USE ONLY, DO NOT MARK IN THIS AREA. ■ Manager ■ Supervisor ■ Proceed Coordinator ▼ Assistant Affiant's Name Lisa Anne McWhorter Social Security Number Date of Birth Address City State ZIP Code 80 RCVD 81 PM 85120 Apache Junction Home Phone No. (with area code) Work Phone No. (with area code) If licensee is a qualified organization, complete the following section: Member? Date Joined Organization ☐ Yes ☐ No Officers? Officer Title Yes Do you have an affidavit on file for any other licensee? ☐ Yes ☐ No If "Yes", list license number(s): , the above-named affiant, under penalty of perjury, upon oath, depose I, Lisa Anne McWhorter AFFIANT'S NAME and say that I will conduct or assist in conducting all bingo games in compliance with the terms of the license, Arizona Revised Statutes, Title 5, Chapter 4, and the rules of the licensing authority. I am of good moral character and have never been convicted of any misdemeanor involving moral turpitude or felony. I have not and shall not receive any reward, compensation or recompense for my participation in the conduct of bingo games except as provided for by law. I hereby swear or confirm that I have read and understand the foregoing and verify that the information and statements made herein are true and correct to the best of my knowledge. Shu McWoss gnature of Affiant 415/23

Please mail to:
Arizona Department of Revenue
1600 W Monroe Street, Division Code 22
Phoenix, AZ 85007

7 (602) 716-7801