

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.

<b>1</b> Applicant's Name Jay Alan McWhorter		
<b>2a</b> Mailing Address 725 W. Apache Trail #2A		
<b>2b</b> City Apache Junction	State AZ	ZIP Code 85120
<b>3a</b> Administrative Office Location 725 W. Apache Trail #2A		
<b>3b</b> City Apache Junction	State AZ	ZIP Code 85120
<b>4a</b> Name of Contact Person Jay McWhorter	<b>4b</b> Telephone No. (928) 444-6480	
<b>4c</b> E-mail Address tumbleweed85120@gmail.com	<b>4c</b> Fax No.	

**Falsification of information contained in this application constitutes a Class 6 felony.**

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.

88

81 PM

80 RCVD

**5 Class B and Class C license applicants only:** If applying as a qualified organization, *check one box* to indicate the type of organization:

- |                                     |  |   |  |
|-------------------------------------|--|---|--|
| <input type="checkbox"/> Charitable | <input type="checkbox"/> Social                    | <input type="checkbox"/> Religious              | <input type="checkbox"/> Veterans                    |
| <input type="checkbox"/> Fraternal  | <input type="checkbox"/> Volunteer Fire Department | <input type="checkbox"/> Homeowners Association | <input type="checkbox"/> Nonprofit Ambulance Service |

**6 Class B and Class C license applicants only** applying as a qualified organization, *provide parent or auxiliary information:*

<b>6a</b> Parent Name			<b>6b</b> Auxiliary Name		
Address – Number and Street, Rural Rt., Apt. No.			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 of Directors of the organization:*

<b>7a</b> Name			<b>7b</b> Name		
Title			Title		
Address – Number and Street, Rural Rt., Apt. No.			Address – Number and Street, Rural Rt., Apt. No.		
City	State	ZIP Code	City	State	ZIP Code
<b>7c</b> Name			<b>7d</b> Name		
Title			Title		
Address – Number and Street, Rural Rt., Apt. No.			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:

Checking Account Number	Bank Name	Bank Branch
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Continued on page 2 →

Applicant's Name (as shown on page 1)

Jay Alan McWhorter

APPLICATION FOR BINGO LICENSE

9 Class B and Class C license applicants only: Bingo interest-bearing account information:

Account Number	Bank Name	Bank Branch
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10 Class B and Class C license applicants only: List all officers and/or supervisors authorized to sign checks from the accounts listed above. If applying as a qualified organization, all supervisors must be members of the applicant:

10a Name	10b Name
Title	Title

11 List the name(s) of the one or two persons who will serve as managers. If applying as a qualified organization, these persons must be members of the applicant. Each person must submit an affidavit.

11a Name	11b Name
Jay McWhorter	Teresa Higgins
Title	Title
Owner	Owner

12 List the name of the one person designated as proceeds coordinator. If applying as a qualified organization, this person must be an officer or director and a member of the applicant. Each person must submit an affidavit.

Name	Title
Teresa Higgins	Owner

13 List the name(s) of the person(s) who will serve as supervisor. If applying as a qualified organization, each person must be a member of the applicant. Each person must submit an affidavit. If additional names are required, please attach affidavits.

13a Name	13b Name
Jay McWhorter	Teresa Higgins
Title	Title
Owner	Owner

14 List the name(s) of the person(s) who will serve as assistants. If applying as a qualified organization, each person must be a member or new member of the applicant. Except for "Class A" licensees, each person must submit an affidavit.

14a Name	14b Name
Lisa McWhorter	
14c Name	14d Name

15 Street address of the PHYSICAL location where live bingo will be played:

725 W. Apache Trail #2A, Apache Junction, AZ 85120

16 Games of Bingo must not exceed 5 days a week. Indicate the time on each respective day that live bingo will be played:

SUN	MON	TUE	WED	THUR	FRI	SAT
<input type="checkbox"/> a.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> a.m.	<input type="checkbox"/> a.m.
<input type="checkbox"/> p.m.	5:00 <input checked="" type="checkbox"/> p.m.	5:00 <input checked="" type="checkbox"/> p.m.	5:00 <input checked="" type="checkbox"/> p.m.	5:00 <input type="checkbox"/> p.m.	<input type="checkbox"/> p.m.	1:00 <input type="checkbox"/> p.m.

Continued on page 3 →

Applicant's Name (as shown on page 1)

Jay Alan McWhorter

**APPLICATION FOR BINGO LICENSE**

17 Indicate the type of premises where bingo will be played. *Check one box:*

- a ☐ Neither rent nor mortgage will be paid from bingo funds.
- b ☒ Rented or leased. *Attach rental affidavit and copy of rental agreement.*

Landlord's Name Gus Kuhn	Address – Number and Street, Rural Rt., Apt. No.		
Telephone Number (with area code)	City Riverside	State CA	ZIP Code 92503

- c ☐ Owned solely by the organization. *Attach copy of mortgage, deed of trust, purchase agreement, escrow agreement, or other related document:*

Holder of Mortgage	Address – Number and Street, Rural Rt., Apt. No.		
Telephone Number (with area code)	City	State	ZIP Code

- d ☐ Owned jointly with other organization. *Attach copy of mortgage, deed of trust, purchase agreement, escrow agreement, or other related document:*

1) Holder of Mortgage	Address – Number and Street, Rural Rt., Apt. No.		
Telephone Number (with area code)	City	State	ZIP Code
2) Co-Owner Holder:	Address – Number and Street, Rural Rt., Apt. No.		
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

18 List bingo licensees who are or will be conducting bingo in the same premises as you and those licensees located within 1,000 feet of your premises:

18a Name	18b Name
Address – Number and Street, Rural Rt., Apt. No.	Address – Number and Street, Rural Rt., Apt. No.
City State ZIP Code	City State ZIP Code

*Continued on page 4 →*

Applicant's Name (as shown on page 1)

Jay Alan McWhorter

APPLICATION FOR BINGO LICENSE

19 Expected bingo expenses:

a Mortgage: \$ \_\_\_\_\_, per month

Payable to	Address – Number and Street, Rural Rt., Apt. No.		
Telephone number (with area code)	City	State	ZIP Code

b Rent: \$7,923.30, per ☒ month ☐ hour ☐ occasion

Payable to Gus Kuhn	Address – Number and Street, Rural Rt., Apt. No.		
Telephone number (with area code)	City Riverside	State CA	ZIP Code 92503

c Janitorial Services: \$ \_\_\_\_\_, per ☐ month ☐ hour ☐ occasion

Payable to	Address – Number and Street, Rural Rt., Apt. No.		
Telephone number (with area code)	City	State	ZIP Code

d Accounting Services: \$ \_\_\_\_\_, per ☐ month ☐ hour ☐ occasion

Payable to	Address – Number and Street, Rural Rt., Apt. No.		
Telephone number (with area code)	City	State	ZIP Code

e Security Services: \$ \_\_\_\_\_, per ☐ month ☐ hour ☐ occasion

Payable to	Address – Number and Street, Rural Rt., Apt. No.		
Telephone number (with area code)	City	State	ZIP Code

f Bingo Supplies: \$1,500.00, per year

Payable to Cactus Bingo Supply	Address – Number and Street, Rural Rt., Apt. No. 3210 E. Roeser Rd. Suite 15		
Telephone number (with area code) (602) 268-2848	City Phoenix	State AZ	ZIP Code 85040

20 Who is your live bingo supplier? (For all bingo supplies). Do you foresee purchasing/renting machines as "technological aids for your live bingo games?

Cactus Bingo supplies, 3210 E Roeser Rd, Phoenix, AZ 85040 We dont forsee any machine rentals.

Continued on page 5 →

Applicant's Name (as shown on page 1)

Jay Alan McWhorter

APPLICATION FOR BINGO LICENSE

I, Jay A. McWhorter, under penalty of perjury and upon oath, declare that I am duly authorized to sign and file this application. I hereby swear or confirm that I have read the foregoing application and know the contents thereof and that all information provided has been fully, accurately, and truthfully completed to the best of my knowledge.



APPLICANT'S SIGNATURE

4-5-23

DATE

Owner

TITLE

Please mail to:  
Arizona Department of Revenue  
1600 W Monroe Street, Division Code 22  
Phoenix, AZ 85007  
(602) 716-7801

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.

☐ Approved

☐ Disapproved

☐ Class A License

☐ Class B License

☐ Class C License

Reviewer's Name (please print)

Date

License Number

Effective Date

Expiration Date

**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 <b>Jay Alan McWhorter</b>		License Number			
Position (check the appropriate boxes): <input checked="" type="checkbox"/> Manager <input checked="" type="checkbox"/> Supervisor <input type="checkbox"/> Proceed Coordinator <input type="checkbox"/> Assistant					
Affiant's Name <b>Jay Alan McWhorter</b>		REVENUE USE ONLY. DO NOT MARK IN THIS AREA.  <div style="border: 1px solid black; padding: 2px; display: inline-block;">88</div>          <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">81</div> PM         </div> <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">80</div> RCVD         </div>			
Social Security Number				Date of Birth	
Address <b>725 W Apache Trail #2A</b>					
City <b>Apache Junction</b>	State <b>AZ</b>			ZIP Code <b>85120</b>	
Home Phone No. (with area code)	Work Phone No. (with area code)				

If licensee is a qualified organization, complete the following section:

Member? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Joined Organization
Officers? <input type="checkbox"/> Yes <input type="checkbox"/> No	Officer Title
Do you have an affidavit on file for any other licensee? <input type="checkbox"/> Yes <input type="checkbox"/> No    If "Yes", list license number(s):	

I, Jay Alan McWhorter, the above-named affiant, under penalty of perjury, upon oath, depose 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.

  
 Signature of Affiant  
  
4-5-23  
 Date

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

☎ (602) 716-7801

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Bingo

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Licensee's Name <b>Jay A. McWhorter</b>		License Number	
Position (check the appropriate boxes): <input checked="" type="checkbox"/> Manager <input checked="" type="checkbox"/> Supervisor <input type="checkbox"/> Proceed Coordinator <input type="checkbox"/> Assistant			
Affiant's Name <b>Teresa Faye Higgins</b>			
Social Security Number		Date of Birth	
Address			
City <b>Apache Junction</b>	State <b>AZ</b>	ZIP Code <b>85120</b>	
Home Phone No. (with area code) (		Work Phone No. (with area code)	

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.


**88**

**81** PM      **80** RCVD

If licensee is a qualified organization, complete the following section:

Member? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Joined Organization
Officers? <input type="checkbox"/> Yes <input type="checkbox"/> No	Officer Title
Do you have an affidavit on file for any other licensee? <input type="checkbox"/> Yes <input type="checkbox"/> No    If "Yes", list license number(s):	

I, **Teresa Faye Higgins**, the above-named affiant, under penalty of perjury, upon oath, depose 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.

  
Signature of Affiant

**4-5-23**  
Date

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

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Licensee's Name <b>Jay A. McWhorter</b>		License Number	
Position (check the appropriate boxes): <input type="checkbox"/> Manager <input type="checkbox"/> Supervisor <input type="checkbox"/> Proceed Coordinator <input checked="" type="checkbox"/> Assistant		<b>REVENUE USE ONLY. DO NOT MARK IN THIS AREA.</b> <div style="border: 1px solid black; padding: 2px; margin: 5px 0;">88</div> <div style="display: flex; justify-content: space-between; margin-top: 100px;"> <div style="border: 1px solid black; padding: 2px;">81</div> <div>PM</div> <div style="border: 1px solid black; padding: 2px;">80</div> <div>RCVD</div> </div>	
Affiant's Name <b>Lisa Anne McWhorter</b>			
Social Security Number	Date of Birth		
Address			
City <b>Apache Junction</b>	State <b>AZ</b>		
Home Phone No. (with area code)		Work Phone No. (with area code)	

If licensee is a qualified organization, complete the following section:

Member? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Joined Organization
Officers? <input type="checkbox"/> Yes <input type="checkbox"/> No	Officer Title
Do you have an affidavit on file for any other licensee? <input type="checkbox"/> Yes <input type="checkbox"/> No    If "Yes", list license number(s):	

I, Lisa Anne McWhorter, the above-named affiant, under penalty of perjury, upon oath, depose 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.

  
 Signature of Affiant

4/5/23  
 Date

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**1600 W Monroe Street, Division Code 22**  
**Phoenix, AZ 85007**

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