

## FOR OFFICIAL USE ONLY PURSUANT TO A.R.S. § 5-404.A

- **License Applicants:** Complete lines 2, 3, and 4. Submit with entire license package to local governing body.
- **Local Governing Body:** Complete and return with license package to the Department of Revenue Bingo Section.

<input checked="" type="checkbox"/> New Application	<input type="checkbox"/> Change of Location	Date	License Number	
From (Name of local governing body) <b>City of Apache Junction</b>		<b>REVENUE USE ONLY. DO NOT MARK IN THIS AREA.</b> <div>[88]</div>    <div>[81] PM</div> <div>[80] RCVD</div>		
Address (number and street, PO Box) <b>300 E. Superstition Blvd</b>				
City <b>Apache Junction</b>	State <b>AZ</b>			ZIP Code <b>85119</b>
Phone No. (with area code) <b>(480) 474-5207</b>				

- 1 This is to certify that on        a hearing was conducted pursuant to Arizona Revised Statute, Title 5, Chapter 4, in the matter of:  
☒ Application for a bingo license by the following applicant.  
☐ Application for a bingo license location transfer.

- 2 Applicant's Name  
**City of Apache Junction**
- 3 Location/Address where games will be conducted:
- |                                |                    |                          |
|--------------------------------|--------------------|--------------------------|
| City<br><b>Apache Junction</b> | State<br><b>AZ</b> | ZIP Code<br><b>85119</b> |
|--------------------------------|--------------------|--------------------------|

- 4 Fill in the time on the days games will be played:

SUN	MON	TUE	WED	THUR	FRI	SAT
<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m. 12:45	<input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m. 12:15	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> a.m. <input checked="" type="checkbox"/> p.m. 12:15	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.

- 5 Background investigations:  
☒ have ☐ have not been conducted on all individuals listed in the Bingo License Application.

- 6 Recommendation for the application: ☐ Approved ☐ Disapproved

- 7 Specific reasons for disapproval are hereby listed pursuant to A.R.S. § 5-404.1:

This endorsement must be signed by a delegated authority of the local governing body.

PRINTED NAME

SIGNATURE

DATE

TITLE

Please mail to: Arizona Department of Revenue, PO Box 29019, Phoenix, AZ 85038-9019

**This Application for Bingo License Packet includes:**

- Arizona Form 833 — Application for Bingo License
- Arizona Form 830 — Affidavit
- Arizona Form 832 —  
Endorsement by Local Governing Body

It is advisable that you obtain and review a copy of the Arizona Revised Statutes on "Games of Bingo" and the Administrative Rules prior to initiating an application. These documents outline qualifications and requirements for obtaining a bingo license and may be obtained from:

- [www.azleg.gov/](http://www.azleg.gov/) and
- [www.azsos.gov/public\\_services/table\\_of\\_contents.htm](http://www.azsos.gov/public_services/table_of_contents.htm)

All forms must be complete and legible. *Please type or print using black ink only.* Forms are available in a fillable pdf format at Arizona Department of Revenue (ADOR) web site [www.azdor.gov](http://www.azdor.gov). Be sure to include on your application a telephone number where you (or another party responsible for the games) can be reached during the day.

The bingo license package for **new** license and appropriate fees must be sent to and approved by the local governing body (the city council for incorporated cities or the county board of supervisors for unincorporated areas) prior to submission to the ADOR Bingo Section. Upon their approval or disapproval, the local governing body will forward the license package to the ADOR Bingo Section.

**Endorsement By Local Governing Body Form**

Complete lines 2, 3, and 4 of *Arizona Form 832, Endorsement by Local Governing Body* and submit to your local governing body with the bingo license package. **A bingo license cannot be issued until this form is received by the ADOR Bingo Section.**

As part of the review of your application for a bingo license, the ADOR Bingo Section will conduct an analysis of any purchase agreement for either equipment and/or real property to determine that such agreement is bona fide. This analysis is conducted pursuant to A.R.S. 5-406.F. The Bingo Section does not "approve" these agreements as to content or other legal ramifications. You are strongly advised to consult with independent legal counsel to determine your rights and obligations under these agreements.

If you need additional forms or have any questions, please call the ADOR Bingo Section in Phoenix at (602) 716-7801.

**CHECKLIST:**

Send copies of all documents listed below unless otherwise noted. Before mailing, check to make sure that you have included the following:

- ☒ **Original** completed Application for Bingo License (Arizona Form 833).
- ☒ **Original** completed affidavits (Arizona Form 830). Class B and Class C applicants must include a completed affidavit for each person participating in the conduct of your games. Class A applicants must include a complete affidavit for each person participating as a manager, proceeds coordinator and supervisors.
- ☐ Rental agreement if more than one licensee is using the same rented premises in which to hold bingo.
- ☐ Application for Special Bonus Game (Arizona Form 831) available at [www.azdor.gov](http://www.azdor.gov). If you do not conduct special bonus games do not complete the application.
- ☒ License fee payable to the Arizona Department of Revenue:

License Type	Fee
Class A	\$10.00
Class B	\$50.00
Class C	\$200.00

- ☐ The local governing body fee will be payable to the appropriate local governing entity:

License Type	Fee
Class A	\$5.00
Class B	\$25.00
Class C	\$50.00

- ☐ If applying as a **qualified organization**, a current membership list must be submitted and must indicate initial membership dates for all members of the applicant organization. Any person from any branch of the applicant who will be participating in the operation of bingo games must be included on the membership list.
- ☐ If applying as a **qualified organization**, the following must be submitted: charter documents, articles of incorporation, corporate bylaws, articles of association, minutes of the establishment meeting, and minutes of meetings for two years (two months of each year) immediately prior to the date of application for the applicant, parent and auxiliary.
- ☐ Purchase agreement for real property (where applicable).
- ☐ Purchase agreement/bill of sale for bingo equipment and supplies.
- ☒ **Original** local governing body endorsement.

- 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 bingo games, you must renew your license prior to the expiration date.

<b>1</b> Applicant's Name		
City of Apache Junction		
<b>2a</b> Mailing Address		
300 E. Superstition Blvd.		
<b>2b</b> City	State	ZIP Code
Apache Junction	AZ	85119
<b>3a</b> Administrative Office Location		
<b>3b</b> City		
Apache Junction	AZ	85119
<b>4a</b> Name of Contact Person	<b>4b</b> Telephone No.	
JJ Underwood	(480) 474-5207	
<b>4c</b> E-mail Address	<b>4c</b> Fax No.	
junderwood@ajcity.net		

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

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.

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

- ☐ Charitable
 ☐ Social
 ☐ Religious
 ☐ Veterans  
☐ Fraternal
 ☐ Volunteer Fire Department
 ☐ Homeowners Association
 ☐ 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, *provide the date the organization was established in Arizona:* [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

- 8 Class B and Class C license applicants only** applying as a qualified organization, *list the current officers of the organization:*

<b>8a</b> Name			<b>8b</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>8c</b> Name			<b>8d</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

Continued on page 2 →

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.

<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	<input type="checkbox"/> Class A License	<input type="checkbox"/> Class B License	<input type="checkbox"/> Class C License
Reviewer's Name (please print)	Date	License Number	Effective Date	Expiration Date

Applicant's Name (as shown on page 1) City of Apache Junction	<b>APPLICATION FOR BINGO LICENSE</b>
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**9 Class B and Class C license applicants only:** Bingo checking account information:

Checking Account Number	Bank Name	Bank Branch
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**10 Class B and Class C license applicants only:** Bingo interest-bearing account information:

Account Number	Bank Name	Bank Branch
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**11 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:

<b>11a Name</b>	<b>11b Name</b>
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

**12 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.**

<b>12a Name</b> JJ Underwood	<b>12b Name</b> Joetta Carlos
Title Recreation Coordinator	Title Recreation Assistant
Address – Number and Street, Rural Rt., Apt. No. 4167 E. Maplewood	Address – Number and Street, Rural Rt., Apt. No. 1033 N. Starr Rd
City State ZIP Code Gilbert AZ 85297	City State ZIP Code Apache Junction AZ 85119

**13 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 JJ Underwood	Address – Number and Street, Rural Rt., Apt. No. 4167 E. Maplewood
Title Recreation Coordinator	City State ZIP Code Gilbert AZ 85297

**14 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.**

<b>14a Name</b> Joetta Carlos	<b>14b Name</b> Jody Dutra
Title Recreation Assistant	Title Senior Recreation Leader
Address – Number and Street, Rural Rt., Apt. No. 1033 N. Starr Rd	Address – Number and Street, Rural Rt., Apt. No. 3636 E. Iverness Ave #207
City State ZIP Code Apache Junction AZ 85119	City State ZIP Code Mesa AZ 85297
<b>14c Name</b> JJ Underwood	<b>14d Name</b>
Title Recreation Coordinator	Title
Address – Number and Street, Rural Rt., Apt. No. 4167 E. Maplewood	Address – Number and Street, Rural Rt., Apt. No.
City State ZIP Code Gilbert AZ 85297	City State ZIP Code

Applicant's Name (as shown on page 1) <b>City of Apache Junction</b>	<b>APPLICATION FOR BINGO LICENSE</b>
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- 15** 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.*

15a Name <b>City Nuttall, Candy</b>	15b Name <b>Gary Smith</b>
15c Name	15d Name
15e Name	15f Name
15g Name	15h Name

- 16** Street address of the physical location where bingo will be played:

**1035 N. Idaho Road, Apache Junction AZ 85119**

- 17** Indicate the time on each respective day that 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.	<b>12:45</b> <input checked="" type="checkbox"/> p.m.	<b>12:15</b> <input checked="" type="checkbox"/> p.m.	<input type="checkbox"/> p.m.	<b>12:15</b> <input checked="" type="checkbox"/> p.m.	<input type="checkbox"/> p.m.	<input type="checkbox"/> p.m.

- 18** List dates of proposed game cancellation if any:

**9/2/19, 11/11/19, 11/28/19,**

- 19** 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	Address – Number and Street, Rural Rt., Apt. No.
Telephone Number (with area code)	City State ZIP Code

**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:*

<b>1)</b> Holder of Mortgage	Address – Number and Street, Rural Rt., Apt. No.
Telephone Number (with area code)	City State ZIP Code
<b>2)</b> Co-Owner Holder:	Address – Number and Street, Rural Rt., Apt. No.
Telephone Number (with area code)	City State ZIP Code
<b>3)</b> Co-Owner Holder:	Address – Number and Street, Rural Rt., Apt. No.
Telephone Number (with area code)	City State ZIP Code

*Continued on page 4 ➔*

Applicant's Name (as shown on page 1)

City of Apache Junction

**APPLICATION FOR BINGO LICENSE**

- 20** 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:

20a Name	20b 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

- 21** 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: \$\_\_\_\_\_ per ☐ month ☐ hour ☐ occasion

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

- 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: \$\_\_\_\_\_ per \_\_\_\_\_

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

Line 21 continues on page 5 →

Applicant's Name (as shown on page 1)

City of Apache Junction

APPLICATION FOR BINGO LICENSE

21 Expected Bingo Expenses, continued...

- g Maximum prize payout per occasion: \$\_\_\_\_\_. Attach game schedule that lists individual prize amounts.

Paid to	Address – Number and Street, Rural Rt., Apt. No.		
Payouts change based on attendance, varies			
Telephone number (with area code)	City	State	ZIP Code

- h Utility Expenses:

Electric (payable to)		Address – Number and Street, Rural Rt., Apt. No.	
Account Number	Monthly Amount	City	State ZIP Code
	\$		

Gas (payable to)		Address – Number and Street, Rural Rt., Apt. No.	
Account Number	Monthly Amount	City	State ZIP Code
	\$		

Water (payable to)		Address – Number and Street, Rural Rt., Apt. No.	
Account Number	Monthly Amount	City	State ZIP Code
	\$		

Trash Removal (payable to)		Address – Number and Street, Rural Rt., Apt. No.	
Account Number	Monthly Amount	City	State ZIP Code
	\$		

22 Briefly state the specific projected use of net proceeds from games of bingo:

I, Elizabeth Langenbach, 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.

Elizabeth Langenbach 9/15 Parks & Recreation Director  
APPLICANT'S SIGNATURE DATE TITLE

Please mail to: Arizona Department of Revenue, PO Box 29019, Phoenix, AZ 85038-9019

☎ (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 Arizona Revised Statutes § 5-404.

Licensee's Name <i>City of Apache Junction</i>	License Number
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Affiant's Name <i>Jody Dutra</i>		
Social Security Number <i>617-74-2211</i>	Date of Birth <i>06/30/1994</i>	
Address <i>3636 E. Inverness Ave Apt. 2007</i>		
City <i>Mesa</i>	State <i>AZ</i>	ZIP Code <i>85206</i>
Home Phone No. (with area code) <i>480 251-3077</i>	Work Phone No. (with area code) <i>480 474 5260</i>	

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<b>88</b>	
<b>81</b> PM	<b>80</b> RCVD

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

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):	

<input type="checkbox"/> Position: Proceeds Coordinator
I, _____, the above-named affiant, under penalty of perjury, upon oath, depose and say that I will use net proceeds 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 am not currently serving as a manager, proceeds coordinator or supervisor on another bingo license. 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 _____
Date _____

<input type="checkbox"/> Position: Manager
I, _____, 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 am not currently serving as a manager, proceeds coordinator or supervisor on another bingo license. 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 _____
Date _____



Affiant's Name (as shown on page 1)

Jody Dutra

## Bingo Affidavit

☒ Position: Supervisor

I, Jody Dutra, the above-named affiant, under penalty of perjury, upon oath, depose and say that I will be continuously present on the premises during all bingo games and until all associated activities have been completed 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 am not currently serving as a manager, proceeds coordinator or supervisor on another bingo license. 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

Date

6/20/19

☐ Position: Assistant

I, \_\_\_\_\_, 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 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

Date

### Review Form and Sign Before Submitting

To avoid processing delays and errors, take a few moments to make sure you have entered all of the required information and verify that it is accurate.

### Affiant's Signature

Sign and date the form.

### The form can be:

Emailed to:  
bingo@azdor.gov

Faxed to:  
602-716-7973

Mailed to:  
Bingo Tax Unit  
PO Box 29019  
Phoenix, AZ 85038-9019

### Bingo Customer Service Center Locations

8:00 a.m. - 5:00 p.m.  
Monday through Friday  
(Except legal Arizona state holidays)

Phoenix Office  
1600 West Monroe  
Phoenix, AZ 85007

### Bingo Customer Service Telephone Number

(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 Arizona Revised Statutes § 5-404.

Licensee's Name <i>City of Apache Junction</i>	License Number
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Affiant's Name <i>Joetta A. Carlos</i>		
Social Security Number <i>338-46-0094</i>	Date of Birth <i>09, 03, 1953</i>	
Address <i>1033 N. Starr</i>		
City <i>Apache Junction</i>	State <i>AZ</i>	ZIP Code <i>85119</i>
Home Phone No. (with area code) <i>(480) 735-8471</i>	Work Phone No. (with area code) <i>(480) 474-5260</i>	

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80 RCVD

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

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):	

☐ Position: Proceeds Coordinator

I, Joetta A. Carlos, the above-named affiant, under penalty of perjury, upon oath, depose and say that I will use net proceeds 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 am not currently serving as a manager, proceeds coordinator or supervisor on another bingo license. 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

Date

☒ Position: Manager

I, Joetta A. Carlos, 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 am not currently serving as a manager, proceeds coordinator or supervisor on another bingo license. 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

Date

Affiant's Name (as shown on page 1)

## Bingo Affidavit

☒ Position: Supervisor

I, Joetta A. Carlos, the above-named affiant, under penalty of perjury, upon oath, depose and say that I will be continuously present on the premises during all bingo games and until all associated activities have been completed 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 am not currently serving as a manager, proceeds coordinator or supervisor on another bingo license. 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.

Joetta A. Carlos  
Signature of Affiant

6/20/19  
Date

☐ Position: Assistant

I, \_\_\_\_\_, 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 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

\_\_\_\_\_  
Date

### Review Form and Sign Before Submitting

To avoid processing delays and errors, take a few moments to make sure you have entered all of the required information and verify that it is accurate.

### Affiant's Signature

Sign and date the form.

### The form can be:

*Emailed to:*  
bingo@azdor.gov

*Faxed to:*  
602-716-7973

*Mailed to:*  
Bingo Tax Unit  
PO Box 29019  
Phoenix, AZ 85038-9019

### Bingo Customer Service Center Locations

8:00 a.m. - 5:00 p.m.  
Monday through Friday  
(Except legal Arizona state holidays)

Phoenix Office  
1600 West Monroe  
Phoenix, AZ 85007

### Bingo Customer Service Telephone Number

(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 Arizona Revised Statutes § 5-404.

Licensee's Name <i>City of Apache Junction</i>	License Number
---	----------------

Affiant's Name <i>Cynthia Nuttall</i>		
Social Security Number <i>367-54-7946</i>	Date of Birth <i>07.30 1948</i>	
Address <i>885 N. VISTA RD</i>		
City <i>APACHE JUNCTION</i>	State <i>AZ</i>	ZIP Code <i>85119</i>
Home Phone No. (with area code) <i>—</i>	Work Phone No. (with area code) <i>602-312-6667</i>	

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.	
<div>88</div>	
<div>81</div> PM	<div>80</div> RCVD

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

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):	

☐ Position: Proceeds Coordinator

I, \_\_\_\_\_, the above-named affiant, under penalty of perjury, upon oath, depose and say that I will use net proceeds 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 am not currently serving as a manager, proceeds coordinator or supervisor on another bingo license. 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

\_\_\_\_\_  
Date

☐ Position: Manager

I, \_\_\_\_\_, 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 am not currently serving as a manager, proceeds coordinator or supervisor on another bingo license. 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

\_\_\_\_\_  
Date

**Bingo Affidavit**☐ Position: Supervisor

I, \_\_\_\_\_, the above-named affiant, under penalty of perjury, upon oath, depose and say that I will be continuously present on the premises during all bingo games and until all associated activities have been completed 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 am not currently serving as a manager, proceeds coordinator or supervisor on another bingo license. 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\_\_\_\_\_  
Date☒ Position: Assistant

I, CYNTHIA NUTTALL, 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 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.

Cynthia A. Nuttall  
Signature of Affiant

6-20-2019  
Date

**Review Form and Sign Before Submitting**

To avoid processing delays and errors, take a few moments to make sure you have entered all of the required information and verify that it is accurate.

**Affiant's Signature**

Sign and date the form.

**The form can be:**

*Emailed to:*  
bingo@azdor.gov

*Faxed to:*  
602-716-7973

*Mailed to:*  
Bingo Tax Unit  
PO Box 29019  
Phoenix, AZ 85038-9019

**Bingo  
Customer Service Center  
Locations**

8:00 a.m. - 5:00 p.m.  
Monday through Friday  
(Except legal Arizona state holidays)

**Phoenix Office**  
1600 West Monroe  
Phoenix, AZ 85007

**Bingo  
Customer Service Telephone  
Number**

(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 Arizona Revised Statutes § 5-404.

Licensee's Name <i>City of Apache Junction</i>	License Number
---	----------------

Affiant's Name <i>GARY LEE SMITH</i>		
Social Security Number <i>505-52-7618</i>	Date of Birth <i>11 03 1941</i>	
Address <i>800 WEST APACHE TRAIL #149</i>		
City <i>APACHE JUNCTION</i>	State <i>AZ</i>	ZIP Code <i>85120</i>
Home Phone No. (with area code) <i>480-799-1852</i>	Work Phone No. (with area code)	

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.	
<b>88</b>	
<b>81</b> PM	<b>80</b> RCVD

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☐ Position: Proceeds Coordinator

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\_\_\_\_\_  
Signature of Affiant

\_\_\_\_\_  
Date

☐ Position: Manager

I, \_\_\_\_\_, 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 am not currently serving as a manager, proceeds coordinator or supervisor on another bingo license. 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

\_\_\_\_\_  
Date

Affiant's Name (as shown on page 1)

## Bingo Affidavit

☐ Position: Supervisor

I, \_\_\_\_\_, the above-named affiant, under penalty of perjury, upon oath, depose and say that I will be continuously present on the premises during all bingo games and until all associated activities have been completed 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 am not currently serving as a manager, proceeds coordinator or supervisor on another bingo license. 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

\_\_\_\_\_  
Date

☒ Position: Assistant

I, GARY LEE SMITH, 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 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.

Gary Lee Smith  
Signature of Affiant

June 20, 2019  
Date

### Review Form and Sign Before Submitting

To avoid processing delays and errors, take a few moments to make sure you have entered all of the required information and verify that it is accurate.

### Affiant's Signature

Sign and date the form.

### The form can be:

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Phoenix, AZ 85007

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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 Arizona Revised Statutes § 5-404.

Licensee's Name <i>City of Apache Junction</i>	License Number
---	----------------

Affiant's Name <i>JJ Underwood</i>		
Social Security Number <i>600-50-0027</i>	Date of Birth <i>03/08/1982</i>	
Address <i>4167 E Maplewood</i>		
City <i>Gilbert</i>	State <i>AZ</i>	ZIP Code <i>85297</i>
Home Phone No. (with area code) <i>480-734-7096</i>	Work Phone No. (with area code)	

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.	
<b>88</b>	
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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):	

☒ Position: Proceeds Coordinator

I, *JJ Underwood*, the above-named affiant, under penalty of perjury, upon oath, depose and say that I will use net proceeds 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 am not currently serving as a manager, proceeds coordinator or supervisor on another bingo license. 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

Date

*6/20/19*

☒ Position: Manager

I, *JJ Underwood*, 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 am not currently serving as a manager, proceeds coordinator or supervisor on another bingo license. 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

Date

*6/20/19*



**Bingo Affidavit**☐ **Position: Supervisor**

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\_\_\_\_\_  
Signature of Affiant\_\_\_\_\_  
Date☐ **Position: Assistant**

I, \_\_\_\_\_, 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 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\_\_\_\_\_  
Date**Review Form and Sign Before Submitting**

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