LGA Use Only

Gaming Supplier and Gaming Service Provider

PERSONAL DISCLOSURE

SECTION A: Personal Information

1. Identification

LAST NAME	FIRST NAME	MIDDLE NAME(S)

LIST OTHER NAMES BY WHICH YOU HAVE BEEN KNOWN (e.g. maiden, adoptive, nicknames)

DATE OF BIRTH (MM/DD/YYYY)	GENDER	SOCIAL INSURANCE NUMBER

Address

# AND STREET/P.O. BOX #	CITY/TOWN	PROVINCE/ STATE	COUNTRY	POSTAL/ZIP CODE

HOME PHONE	MOBILE PHONE	BUSINESS PHONE

- 3. Name of gaming supplier or service provider applicant
- Relationship to applicant (e.g. director, officer, shareholder)

SECTION B: Residence History

5. List every place of residence for the past five years beginning with your most recent address.

STREET ADDRESS	CITY/TOWN	PROVINCE/ STATE	COUNTRY	FROM (MM/YYYY)	TO (MM/YYYY)



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SE	CTION C: Citize	enship				
6.	Are you a Canadi	an citizen? 🔲 By Birth	By Naturaliza	tion		
7.	If you are not a C	anadian citizen, are you	a permanent residen	t of Canada?	YES] NO
8.	If you are not a ci	tizen of Canada, provide	the name(s) of the co	ountry where y	ou hold citiz	enship:
SE	CTION D: Empl	oyment History				
9.		our current position, pr	ovide the following in	formation for	each job you	have held in the las
	NAME	ADDRESS	POSITION	FROM (MM/YYYY)	TO (MM/YYYY)	REASON FOR LEAVING
	Have you ever he	ership Interests eld a 10% or greater own If yes, provide deta		business entit	y in any juri:	sdiction?
		NAME & ADDRESS		% INTEREST		POSITION
SE	CTION F: Posit	ions of Trust				
11.	Have you ever se during the last fi	rved as an officer or direvel we years? The YES The Section 1	ector of a corporation NO If yes, provi		ess entity in	any jurisdiction
		NAME & ADDRESS		POSI	TION	DATES HELD (MM/YYYY - MM/YYYY



SECTION G: Bankruptcy and Insolvency Proceedings 12. Have you ever made an assignment in bankruptcy or had a petition filed against you for any type of bankruptcy or insolvency under any law in any jurisdiction in the last five years? If yes, provide details. Name and address of filing party _____ Date of assignment or petition filed _____ Name and address of court _ Name and address of Receiver or Trustee _____ **SECTION H: Civil Proceedings** 13. Have you ever had any claims made against you based in whole or in part on fraud, deceit, misrepresentation, breach of trust or similar conduct in any jurisdiction in the last five years? YES If yes, provide details. a) Description of claim: Names of other parties involved in the claim: _____ Name and address of court: ___ d) Date of proceedings: ___ Court file number: ____ Outcome of proceedings: **SECTION I: Criminal Proceedings** 14. Have you ever been charged or convicted of a criminal offence, for which you have not been pardoned, in any jurisdiction? YES NO NO If yes, provide details. DATE (MM/YYYY) LOCATION **OFFENCE DISPOSITION** 15. Do you have any criminal charges pending in any jurisdiction? YES NO If yes, provide details.

DATE (MM/YYYY)	LOCATION	OFFENCE



16. Provide the nam		ess of any	court where proceed	lings were/wi	ll be held and	I the na	ame and address of
Court							
Investigative Agency							
SECTION J: Licensing/Registration History 17. Have you, or any business entity in which you hold or have held an ownership interest or in which you currently serve or have served as an officer or director, ever applied to any licensing agency in any jurisdiction for any permit, licence, registration or qualification in connection with gaming? YES NO If yes, provide details.							
NAME OF LICENSING	AGENCY		ADDRESS	TYPE OF LICENCE	DATE OF APPLICATION		DISPOSITION
18. Have you, or any business in which you hold or have held an ownership interest, or in which you currently serve or have served as an officer or director, ever held a licence or registration certificate in connection with gaming refused, suspended or revoked in any jurisdiction? YES NO If yes, provide details.							
NAME OF LICENSING AGENCY	ADDI	RESS	TYPE OF LICENCE	DATE OF APPLICATION	DISPOSITI	ON	REASON FOR ACTION



SECTION K: Financial Information

19. Assets & Liabilities

Complete the following statements of assets, liabilities and income. Enter the amounts as of the date of this statement. Each listed amount must be described on the appropriate schedule. Your application must include your income tax returns for the last three years.

ASSETS		LIABILITIES		
CURRENT	AMOUNT (\$)	CURRENT	AMOUNT (\$)	
Cash on Hand		Accounts Payable		
Cash in Banks		Taxes Payable		
Accounts and Notes Receivable		Long-term Liabilities		
Investments		Notes Payable		
Stocks and Bonds		Mortages Payable		
Business Investments		Other Liabilities		
Fixed Assets				
Real Estate				
Other Assets				
Total Assets		Total Liabilities		
Net Worth = Total Assets - Total Liabilities			\$	

20. Annual Income

SOURCE OF INCOME	AMOUNT (\$)
Salary	
Interest Income	
Bonuses and Commissions	

SOURCE OF INCOME	AMOUNT (\$)
Dividend Income	
Other (specify)	
Total Income	\$

21. Cash in Banks

List all accounts, foreign and domestic, maintained by you or any other person on your behalf, in which you have a current, or anticipate a future, benefit.

NAME AND ADDRESS OF BANK	NAME ON ACCOUNT	ACCOUNT NUMBER	TYPE OF ACCOUNT	BALANCE



22. Accounts and Notes Receivable

List all accounts, foreign and domestic, maintained by you or any other person or entity on your behalf, in which you have a current, or anticipate a future, benefit.

NAME AND ADDRESS OF DEBTOR	DATE INCURRED	ORIGINAL AMOUNT DUE	UNPAID BALANCE	MATURITY DATE (MM/YYYY)	CURRENT MARKET VALUE

23. Stocks and Bonds

List all stocks and bonds held or controlled by you, or any person or entity on your behalf in which you have a current, or anticipate a future, interest. Whenever such interests exist through a beneficial interest in trust, the stocks and bonds in such trust must be listed.

NAME AND ADDRESS OF ISSUING COMPANY OR GOVERNMENT AGENCY	ТҮРЕ	NUMBER OF SHARES OR BONDS	PURCHASE PRICE	DATE OF PURCHASE (MM/YYYY)	CURRENT MARKET VALUE

24. Business Investments

List all information regarding any business investments in which any direct, indirect, vested or contingent interest is held by you or any person or entity on your behalf in which you have a current, or anticipate a future, benefit.

ENTITY NAME	NUMBER OF SHARES	% OWNERSHIP	PURCHASE PRICE	DATE OF PURCHASE (MM/YYYY)	INDIVIDUALS OR ENTITIES SHARING AN INTEREST	CURRENT MARKET VALUE



25. Real Estate

List any real estate in which any direct, indirect, vested or contingent interest is held by you or any person or entity on your behalf, in which you have a current, or anticipate a future, benefit.

LOCATION AND ADDRESS	PURCHASE PRICE	DATE OF PURCHASE (MM/YYYY)	% OWNERSHIP	NAMES OF OTHER OWNERS	CURRENT MARKET VALUE

26. Other Assets

List any other assets you hold (i.e. vehicles, personal property, life insurance).

TYPE OF ASSET	NAME IN WHICH HELD	DATE OF PURCHASE (MM/YYYY)	PURCHASE PRICE	CURRENT MARKET VALUE

27. Notes Payable

List any notes payable which you owe.

NAME AND ADDRESS OF CREDITOR	DATE INCURRED (MM/YYYY)	ORIGINAL AMOUNT	UNPAID BALANCE	PAYMENT PERIOD	INTEREST RATE	MATURITY DATE (DD/MM/YYYY)	COLLATERAL

28. Mortgage Payable

List any mortgages, liens payable or real estate for which you are obligated.

NAME AND ADDRESS OF CREDITOR	DATE INCURRED (MM/YYYY)	ORIGINAL AMOUNT	UNPAID BALANCE	PAYMENT PERIOD	INTEREST RATE	MATURITY DATE (DD/MM/YYYY)	COLLATERAL



29. Other Liabilities

List any other indebtedness for which you are obligated.

NAME AND ADDRESS OF CREDITOR	DATE INCURRED (MM/ YYYY)	ORIGINAL AMOUNT	UNPAID BALANCE	PAYMENT PERIOD	INTEREST RATE	MATURITY DATE (DD/MM/ YYYY)	DESCRIPTION OF LIABILITY	COLLATERAL

30. Contingent Liabilities

List any contingent liabilities for which you are obligated.

NAME AND ADDRESS OF CONTINGENT CREDITOR	DESCRIPTION OF OBLIGATION	DATE INCURRED (MM/YYYY)	ORIGINAL AMOUNT OF CONTINGENT OBLIGATION	OUTSTANDING AMOUNT OF CONTINGENT OBLIGATION



Consent for Release of Information

The LGA is required to conduct investigations for the purpose of licensing gaming service providers and gaming suppliers in Manitoba. This information is collected under the authority of The Liquor and Gaming Control Act. Any personal information that you provide to the LGA is collected in compliance with The Freedom of Information and Protection of Privacy Act (FIPPA). The personal information that you provide will be used only for the purposes for which it is collected, and not in any other way without your consent. In order to comply with the requirements set forth in The Liquor and Gaming Control Act to complete or verify the information provided in this application, representatives of the LGA may be required to collect and/or receive additional information from some or all of the following domestic and/or foreign sources:

- a) federal, provincial, municipal or state licensing bodies or police services
- b) other law enforcement agencies or sheriff's offices
- c) Office of the Superintendent of Bankruptcy
- d) credit bureaus

- financial institutions
- industry associations
- former or current employers q)
- government ministries or agencies

The information collected in this application may be used and disclosed as follows:

- to evaluate the applicant's financial, business and criminal history
- b) information on the applicant and on individuals and enterprises identified in connection with the applicant may be shared with Manitoba government officials who are assisting the LGA in the evaluation of the licence application
- c) the LGA may provide such information to law enforcement agencies and gaming regulators, for gaming-related investigations or clearances

I hereby consent for my personal information to be collected from any of the individuals listed above. I further consent to the release of information which may be obtained through the licensing and investigation process to law enforcement agencies and to gaming regulators for the aforementioned purposes.

Signature	Position	Date
Print Name		



Investigation Authorization _, on this ___ ______, hereby authorize the LGA or its authorized representative to conduct an investigation into my background using whatever legal means it deems appropriate. Any person or agency requested to provide lawful information to the LGA is hereby authorized to provide such information in a lawful manner. The LGA may provide the information disclosed in this application or collected during the course of an investigation to law enforcement agencies or gaming regulators for gaming-related investigations or clearances. Signature Position Date Print Name **Ongoing Security Screening** I authorize the LGA to conduct ongoing personal history investigations, including but not limited to checks for outstanding criminal charges, a criminal records check and a credit check as required. This authorization shall be in effect during the entire course of my licence. I agree to give the LGA, as and when requested, any additional authorization that may be required by the LGA or others for the purpose of permitting the LGA to conduct such ongoing investigations. I have been advised that refusal to provide any such additional authorization may be grounds for revocation or suspension of a licence with the LGA. Signature Position Date Print Name

Please send this form directly to the LGA's Gaming Licence Department at 800-215 Garry Street, Winnipeg, Manitoba R3C 3P3, by email to gaminglicence@LGAmanitoba.ca or by fax to 204-954-9451.

PRIVACY NOTICE

The LGA is committed to protecting your privacy. The personal information you are providing on this form is collected under the authority of The Liquor and Gaming Control Act, Regulations and section 36(1)(a) of The Freedom of Information and Protection of Privacy Act. The information is strictly for the use of the LGA to process your application, assess your eligibility for a licence and for enforcement purposes.

Please be advised that the LGA may make the following information public: your organization's full legal name, address, LGA licence number, event location(s), date(s) and prize information.

Your personal information is protected by The Freedom of Information and Protection of Privacy Act. Any other use, and any disclosure, of your personal information by the LGA must be authorized by you or must be authorized under The Freedom of Information and Protection of Privacy Act.

If you have any questions about the collection of your personal information, please contact the LGA's Freedom of Information and Protection of Privacy Coordinator at 204-954-9400 or FIPPAcoordinator@LGAmanitoba.ca.



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