

4 — Other Account Changes

4a. New phone number(s)

Day: _____ Evening: _____ Mobile: _____

4b. Change or add email address:

The Tax Commission will send all electronic mail to this address.

New email address: _____

4c. Change DBA/Business name:

☒ DBA

☐ Legal business name

☐ Mark here and attach Dept. of Commerce Articles of Incorporation (not required for sole proprietors)

New name: Freddy Fazbear's Mega Pizzaplex

4d. Add/remove officer/owner:

☐ Mark here and attach Dept. of Commerce Change Form.

Add (name and address): _____ SSN: _____

Add (name and address): _____ SSN: _____

Add (name and address): _____ SSN: _____

Add (name and address): _____ SSN: _____

Remove: _____

4e. Other – explain:

5 — Outlet Changes and Closure

If changing more than one outlet, attach additional sheets in this format.

- Use Section 5 to report CHANGES to EXISTING outlets.
- To add NEW SALES TAX or TRANSIENT ROOM outlets, use form TC-69B.
- To add NEW CIGARETTE, TOBACCO or E-CIGARETTE outlets, use form TC-69.

| Current physical street address for this sales tax outlet | | | Phone |
|---|--------|-------|----------|
| City | County | State | ZIP code |

☐ Close sales tax outlet

Closure date: _____

Outlet number*: _____

*The outlet number is printed on the sales tax license.

☐ Close transient room outlet

Closure date: _____

Outlet number*: _____

*The outlet number is printed on the sales tax license.

☐ Close cigarette/tobacco license outlet

Closure date: _____

License number: _____

☐ Close e-cigarette license outlet

Closure date: _____

License number: _____

☐ Change phone number: _____

☐ Other:

6 — Authorized Signature

This form will be rejected without a signature.

SIGN HERE

Joe Hall

Authorized Applicant or Owner

January 17, 2029

Date