RASK Nebraska Racing and **Gaming** Commission **Racetrack** Gaming **Operators** License Application AND GAMINE CUMMUS

A MESSAGE FROM THE DIRECTOR:

Dear Applicant,

Thank you for your interest in establishing an equine racetrack within the jurisdiction of Nebraska. The Nebraska Racing and Gaming Commission is committed to fostering a thriving, safe, and transparent horse racing industry in our state.

A RACETRACK OPERATOR'S LICENSE is required in accordance with the Nebraska Revised Statute § 2-1201 through § 2-1219, which govern the licensing and authorization of horse racing operations in Nebraska.

Our primary objectives are to ensure equine safety, maintain a fair and honest racing environment, and uphold the integrity of the sport. The licensing process is designed to be comprehensive and rigorous, in alignment with the Racetrack Gaming Act. This approach allows us to carefully evaluate and regulate those who seek to participate in the horse racing industry, thereby protecting the interests of both the horsemen and the public.

The application process involves an extensive background investigation of your business and all affiliated individuals. This thorough examination is essential to our regulatory responsibilities. The findings of this investigation will be presented to the Nebraska Racing and Gaming Commission for consideration of your application.

Additionally, our licensing office operates on a schedule that includes specific days for different locations, which you should take into account when planning your application submission.

We appreciate your understanding of the rigorous nature of this process. It is designed to uphold the highest standards of integrity and safety within the horse racing industry in Nebraska.

The Nebraska Racing and Gaming Commission and its staff look forward to working with qualified applicants who share our commitment to excellence in horse racing. We wish you success in your endeavors and thank you for your interest in contributing to Nebraska's equine racing industry.

Sincerely,

Casey Ricketts Executive Director Nebraska Racing and Gaming Commission

APPLYING FOR YOUR Racetrack Gaming Operators License



OBTAIN YOUR APPLICATION

Applications can be obtained by calling 402-471-4155 or going to our website racingcommission.nebraska.gov.



FILL OUT YOUR APPLICATION

Items you must provide:

- Application forms (*completed*, *signed* & *notarized*)
- Supporting documentation as specified on the attached Application Instructions Checklist



SUBMIT YOUR APPLICATIONNebraska Racing and Gaming CommissionDeliver hard copy to:3401 Village Drive, Suite 100Lincoln, Nebraska 68514

Deliver electronic copy (in a text searchable document format) to: Laurie.Holman@nebraska.gov

Make a check or money order payable to: The Nebraska Racing and Gaming Commission



ONLY UPON THE RECEIPT OF A COMPLETED APPLICATION WILL THE REVIEW PROCESS BEGIN

APPLICATION FULLY COMPLETED IN BLACK INK

Type or clearly print an answer to every question. If a question does not apply to you, indicate so with an N/A. If you are unsure if a question applies to you or what information the form is asking you to provide, contact the Nebraska Racing and Gaming Commission office to seek clarification. If the available space is insufficient, continue on a separate sheet and precede each answer with the appropriate title.

ALL FORMS SIGNED & ATTACHED

The following accompanying forms must be signed and returned with the application:

- □ Affirmation & Consent
- □ Investigation Authorization/Authorization to Release Information
- Applicant's Request to Release Information (leave top line of form blank)

□ REOUEST FOR FINANCIAL RECORDS AND RELEASE FROM LIABILITY

3 ALL REQUESTED INFORMATION ATTACHED

The following information must be attached, if applicable:

- All applicable information requested on pages 1 through 15 of the application
- □ Trade Name Registration if applicable
- Certificate of authority to do business in the state of Nebraska if incorporated or organized outside NE
- Articles of Incorporation, including amendments and restated articles
- □ Articles of Organization or Certificates of Organization, including amendments
- □ Bylaws
- □ Organizational minutes and/or other corporate records reflecting ownership and election of officers or managers
- Dertnership Agreement or Operating Agreement, including amendments
- Trust Agreement, including amendments
- □ Tax fillings for the past three years
- □ If a corporation, SEC filings for past 3 years and meeting minutes from past 12 months
- □ If a partnership or limited liability company, a list of the amount and date of each capital contribution of any partner to the applicant
- □ Organizational chart listing positions being held for racing operations, along with their duties & responsibilities

NOTE: The Commission reserves the right to request additional information and documentation throughout consideration of this application.

INFORMATION ON EXECUTIVE SHAREHOLDERS

For applicants other than corporation, list the names and addresses of all executive officers and managerial officers. Indicate positions and offices held by each person named and their principal occupation(s) during the past three years.

State in complete detail whether the applicant, or any director, executive officer, stockholder or manager has owned an interest in or has been employed by any firm, partnership, association or corporation previously licensed to conduct a race meeting in any jurisdiction.

□5

APPLICATION FEES AND BACKGROUND DEPOSIT

Submit appropriate license, application, and background fees. ☐ Gaming Operator: \$5,000.00 nonrefundable license fee ☐ Check or money order payable to: Nebraska Racing and Gaming Commission

DELIVER APPLICATION

Deliver the application by hard copy and an electronic copy (in a text-searchable document format) to: Nebraska Racing and Gaming Commission 3401 Village Drive, Suite 100, Lincoln Nebraska 68516 Laurie,Holman@nebraska.gov Nebraska Racing and Gaming Commission

Nebraska Racetrack Gaming Operator

Applicant's Name			Control Number (Assigned by Gaming Control Board)			
Doing Business As (DBA) & Trade Names E-m				E-mail Address		
Street Address of Gaming Business (Required for Operator applicant	s)			Business Phone Number		
City	State	Zip		Business FAX Number ()		
Mailing Address, if different from Street Address (city, state, zip)						
On a separate sheet, list all principal places of bus	iness for the past	10 years if diffe	erent from above.			
Primary Contact Person for Business		Title		Primary Contact Phone Number		
Primary Contact Address (city, state, zip)				Primary Contact FAX Number		
Type of Business Structure Sole Proprietorship S Corporation Publicly Traded Corp	Limited Partn	ership	Limited Liability Co Other	C Corporation		
State of incorporation or creation of business entity				Date		
Date of qualification to conduct business in Nebraska (PROVIDE CE	ERTIFICATE OF AUTI	HORITY OR EQUIV	ALENT FROM NE Sec	retary of State)		
If a corporation, list all states where corporation is authorized to con	duct business					
List all names used by the business entity (other than above)						
Attach copies of all articles of incorporation, bylav copy of any partnership, trust agreement or equiva				on, operating agreement, or a true		
Attach copies of biennial reports and SEC filings, i months.	if any, for past thi	ree years, and a	ll minutes from al	l company meetings in the past 12		
Premises Information (For Operators)						
Tremises information (For operators)						
Total Square Footage of the Building (Gross Building Area) T	otal Square Footage to I	Be Licensed for Gam	ing A	Anticipated # of Gaming Devices		
Drawing to scale of the building and each floor in v (and amendments thereto), property ownership, or				y of your lease or rental agreement		

Check #	Money Order #	ŀ	Application Control #	Entity Control #

OWNERSHIP STRUCTURE

List all persons and/or entities with ownership interest, and all officers and directors, whether they have ownership interest or not. If an entity (corporation, partnership, LLC, etc.) has interest, list all persons affiliated with such entity; their ownership in the entity, and their effective ownership in the license. List all parent, holding or other intermediary business interests. A Key Person Application form must be submitted for each person including officers, directors, equity security holders of 5% or more, partners, general partners, limited partners, trustees, beneficiaries, key persons and any other individuals who exert significant influence in the company. If a publicly traded corporation, submit recent shareholder list from your transfer agent for all shares of common and preferred stock. See attached Ownership structure example attached as appendix A.

Make additional copies of this page, if necessary.						
Name	Title	SSN/FEIN	Date of Bir	th	Application YES	Submitted?
Address (city, state, zip)			Phone)		
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated	l With	Effective (Own. % in Ap	plicant
Name	Title	SSN/FEIN	Date of Bir	th	Application	Submitted?
Address (city, state, zip)			Phone)	1	
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated	l With	Effective (Own. % in Ap	plicant
Name	Title	SSN/FEIN	Date of Bir	th	Application YES	Submitted?
Address (city, state, zip)		1	Phone ()	1—	
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated	l With	Effective (Own. % in Ap	plicant
Name	Title	SSN/FEIN	Date of Bir	th	Application YES	Submitted?
Address (city, state, zip)			Phone)		
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated	l With	Effective (Own. % in Ap	plicant
Name	Title	SSN/FEIN	Date of Bir	th	Application	Submitted?
Address (city, state, zip)	•		Phone ()	•	
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated	l With	Effective (Own. % in Ap	plicant
Name	Title	SSN/FEIN	Date of Bir	th	Application YES	Submitted?
Address (city, state, zip)	•		Phone)		
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated	l With	Effective (Own. % in Ap	plicant
Name	Title	SSN/FEIN	Date of Bir	th	Application YES	n Submitted?
Address (city, state, zip)	4		Phone)		
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated	l With	Effective (Own. % in Ap	plicant
Total Shares Authorized	Total Shares Outstanding		Type of Sh		Common	
Are there any outstanding options and warrants?	tstanding options and warra	nts	1			
Are there any other persons, other than those listed in the owners indirectly, any compensation or rents based upon a percentage or with the applicant to manage its gaming operations or to conduct VES* NO *If YES, attach list of persons and sub	share of gross proceeds or business in the applicant's g	income of the gaming ventur gaming establishment or busi	e or who wi ness operati	ill enter int on?	o a contract	or contract

LICENSING HISTORY

1. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever applied YES NO for a gaming license in this or any other jurisdiction, foreign or domestic, whether or not the license was ever issued? If YES, provide details on a separate sheet, including jurisdiction, type of license, license number, and dates license held or applied for.
2. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever been YES NO denied a gaming license, withdrawn a gaming license or had any disciplinary action taken against any gaming license that they have held in this or any other jurisdiction, foreign or domestic? If YES, provide details on a separate sheet, including jurisdiction, type of action, and date of action.
3. Is the applicant, the applicant's parent company or any other intermediary affiliate of applicant in good YES NO corporate standing in Nebraska, as certified by the Nebraska Secretary of State or its successor agency, the Public Regulation Commission, and in all other states where it transacts business? If NO, provide details on a separate sheet.
4. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever been YES NO charged with, or convicted of, any illegal gaming activity in Nebraska or any other jurisdiction? If YES, provide details on a separate sheet, including jurisdiction, type of action, and date of action.

FINANCIAL HISTORY

1. Is the applicant, the applicant's parent company or any other intermediary affiliate of applicant delinquent in the payment of any judgments or tax liabilities due to any governmental agency anywhere? If YES, provide details on a separate sheet and attach any documents to prove settlement or resolution of the delinquency.	YES NO
2. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever held a financial interest in a gambling venture, including but not limited to, a race track, dog track, race horse or dog, lottery, casino, bookmaking operation, internet casino, card room, bingo parlor or pull tabs, whether or not a license to hold such interest was applied for or received? If YES, provide details on a separate sheet.	YES NO
3. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever filed a bankruptcy petition, had such a petition filed against it, or had a receiver, fiscal agent, trustee, reorganization trustee or similar person appointed for it? If YES, provide details on a separate sheet and attach any documents from the bankruptcy court.	YES NO
4. Does the applicant, the applicant's parent company or any other intermediary affiliate of applicant now own, has it ever owned, or does it otherwise derive a benefit from, assets held outside the United States, whether held in the business' name or another name, on its behalf or for another entity, or through other business entities, or in trust, or in any other fashion or status? If YES, provide details on a separatesheet.	U YES NO

- 5. Is the applicant, the applicant's parent company or any other intermediary affiliate of applicant currently a party to, or has it ever been a party to, in any capacity, any business trust instrument? If YES, provide details on a separate sheet.
- 6. Has a complaint, judgment, consent decree, settlement or other disposition related to a violation of federal, state or similar foreign antitrust, trade or security law or regulation ever been filed or entered against the applicant, the applicant's parent company or any other intermediary affiliate of applicant? If YES, provide details on a separate sheet and attach any documents to prove the settlement of any of these issues. Include any items currently under formal dispute or legal appeal.

Applicant's Printed Name	Federal Tax ID	CRS ID#
11		
Authorized Signature		Date

YES NO

YES NO

FINANCIAL HISTORY (Continued)

7. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever been a party to a lawsuit within the last five years, either as a plaintiff or defendant, complainant or respondent, or in any other fashion, in this or any other country? If YES, provide details on a separate sheet and attach any documents to prove the settlement of any of these issues. Include any items currently under formal dispute or legal appeal.	YES NO
8. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant filed a business tax return in the past three years? If YES, attach all business tax returns filed in the past three years.	YES NO
9. Is the applicant a prospective business or has it recently (within two years) begun operations? If so, submit an estimated beginning balance sheet (proforma) and a statement of amount(s) and source(s) of funding for the business and specific documentation to support the declaration.	YES NO
10. Is the applicant a party to a lease of the land to be used for gaming operations? If YES, attach copies of all leases to which the business is a party.	YES NO
11. Does the applicant have a compliance committee or compliance officer? If YES, attach a copy of compliance committee minutes or compliance officer reports from the past 12 months.	YES NO
12. Has any interest or share in the profits from gaming been pledged or hypothecated as security for a debt or deposited as a security for the performance of an act or to secure the performance of a contract? If YES, provide details on a separate sheet.	YES NO
13. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever	YES NO

13. Has the applicant, the applicant's parent company or any other intermediary affiliate of applicant ever been a party to a bankruptcy within the last ten years, either as a plaintiff or defendant, complainant or respondent, or in any other fashion, in this or any other country? If YES, provide details on a separate sheet and attach any documents to prove the settlement of any of these issues. Include any items currently under formal dispute or legal appeal.

FINANCIAL HISTORY ATTACHMENTS

- 1. Attach a list detailing the operating and investment accounts for this applicant or equivalent, including financial institution name, address, telephone number, and account number for each account.
- 2. Attach a list detailing each outstanding loan and financial obligation obtained for use in this business, including creditor name, address, phone number, loan number, loan amount, loan terms, date acquired, and date due.
- 3. Attach balance sheets and profit and loss statements, **certified** by independent certified public accountant(s) covering the last three years for the applicant, the applicant's parent company and any intermediary affiliates of applicant. Applicants that are subsidiaries of publicly traded companies can provide audited financial statements issued pursuant to Securities and Exchange Commission guidelines for Form K.
- 4. If the business entity has been in business for less than three years, attach balance sheets and profit and loss statements from the time of commencement of business operations and projected for three years from the time of commencement of business operations.
- 5. Attach a list of persons other than directors, officers, and key persons whose salaries plus bonuses exceed \$150,000 per year.
- 6. Attach a description of any bonus or profit-sharing arrangements within yourorganization.
- 7. Supply all existing contracts between the Applicant and businesses in Nebraska and any contracts over \$500,000 outside Nebraska. If there is no written contract, then indicate the business arrangement showing business dealing, phone number, and address.

ANY CHANGES IN OWNERSHIP OR BUSINESS STRUCTURE					
Person who maintains applicant's business records	Title				
Address	Phone Number				
Person who prepares applicant's tax returns, government forms & reports	Title				
Address	Phone Number				
Location of financial books and records for applicant's business					
Applicant's Printed Name (Last Name, First Name, Middle Name)					
Signature of Applicant	Date				

Schedule A STATEMENT OF PRE-OPENING CASH Nebraska Gaming Operators Application

A. F	Funds Available Prior to Opening:	Totals
1	. Current investments (attach schedule providing detail as to who invested the money and what interest in the firm or entity they received for their investment.)	\$
2	2. Current loans from lending institutions (attach schedule identifying the institution date of each loan, the terms of each loan, and original and current balance).	\$
3	3. Current loans from individuals and other business entities (attach schedule identifying the individual or business, date of each loan, the terms of each loan, and original and current balance).	\$
Δ	Anticipated investments (attach schedule providing detail as to who will invest the money and what interest in the firm or entity they will receive for their investment).	\$
5	5. Anticipated loans from lending institutions (attach schedule certifying the institution and terms of the loan).	\$
6	6. Anticipated loans from individuals and other business entities (attach schedule identifying the individuals and other business entities and the terms of each loan).	\$
Total Fur	nds Available Prior to Opening:	\$
B. I	Expenditure or Disposition of Available Funds Prior to Opening:	
1	 Prepaid Gaming Taxes and Licenses: Federal Government Tax & Fees Application Fees 	\$ \$
	c.Background Investigation Feed.Other (describe)	\$ \$
-	paid Gaming Taxes and Licensing Related Fees 2. Other License Fees (Attach Schedule)	\$
	B. Incurred Expenditures for: a. Building, Including Construction and Repair (Attach Schedule) b. Equipment (Attach Schedule) c. Supplies (Attach Schedule) d. Attach all Other Pre-Opening Expenditures (Salaries, Advertising,	\$ \$ \$ \$ \$
4	Deposits, Etc.) (Attach Schedule) 4. Anticipated Expenditures for: a. Building, Including Construction and Repair (Attach Schedule) b. Equipment (Attach Schedule)	\$ \$ \$
	c. Supplies (Attach Schedule)	\$

C. Cash Available for Operation (A Minus B)						
Show	in what form this cash will be:					
a.	Bank	\$				
b.	Other Cash Register Funds	\$				
с.	Other (Describe)	\$				
Printed Full Legal Name of Agent (Last Name, First Name, Middle Name)						
Signature of Authorized Agent Date						

* Subsidiaries of publicly traded companies can provide audited financial statements issued pursuant to Securities and Exchange Commission guideline for Form K.

Schedule B-2 First-Year Cash Flow Projections for Racetrack Gaming Operators Nebraska Racetrack Operators Gaming Application

	I	cors Gaming	11		1
Applicant's Name	Total	Gaming	Food & Beverage	Other Operations	Other Operations
Twelve-Month Period Ended	All Operations	Operations	Amount	(describe)	(describe)
1. INCOME					
2. Gross revenue (but for gaming operations show expected					
gross coin-in)					
3. Cost of Sales (for gaming operations, show expected					
payout) 4. GROSS MARGIN (Line 2 – Line 3)					
 5. DIRECT EXPENSES 					
 Cost of purchasing, leasing and/or servicing gaming 					
machines & assoc. equip.					
7. Gaming Taxes					
8. Payroll Taxes and Benefits					
9. Payroll – Officers and Owners					
10. Payroll – Other Employees					
11. Other Direct Expenses (Describe)					
12. Total Direct Expenses (Sum of Lines 6 through 11)					
13. NET INCOME BEFORE G & A EXPENSE (Line 4 -					
Line 12)					
14. GENERAL AND ADMINISTRATIVE EXPENSES					
15. Advertising and Promotion					
16. Depreciation and Amortization					
17. Other Taxes and Licenses			INSTRI	JCTIONS	
18. Debt Principal & Interest Expenses (Attach Schedule)					
19. Music and Entertainment Expenses (Describe)			this schedule the antic	ipated results of your of	perations for a full 12
20. Rent of Premises		months.			
21. Payroll Taxes and Benefits		2 Round all a	amounts to the nearest	ten, hundred, or thousa	nd dollars
22. Payroll – Officers and Owners			is most appropriate.	ten, nunarea, or mousa	ind donars,
23. Payroll – Other Employees		whichever	is most appropriate.		
24. Other G and A Expenses (Describe)		3. Attach sup	plementary schedules	to explain or clarify ass	sumptions used in
25. Total G and A Expenses (Sum of Line 15 through			all income and exper		
Line 24)					
26. NET OPERATING INCOME (Line 13 - Line 25)				andise sold. For gaming	g operations, show
27. Add Back Non-Cash Expenses (Line 16)		estimated p	payout only.		
28. INCREASE IN CASH from Operations (Line 26 + Line 27)			1 (1)	0 (2) T 1 · · · · · · · · · · · · · · · · · · ·	11 1 6 1
29. Add Opening Cash (From Schedule A)		5. Add back non-cash expenses (line 28). This will generally be "depred and amortization expense" amounts.			iny be "depreciation
30. Ending CASH (Line 28 + Line 29)		and amortization expense amounts.			
con Enong Cristi (Enio 20 · Enio 27)					

CERTIFICATION

I, <u>Applicant's Printed Name</u>, acknowledge, understand and agree that by applying for and accepting any license, certification, registration, renewal, finding of suitability, or other approval (each a "License") from the Nebraska Racing and Gaming Commission ("Commission"), I am certifying to the Commission that:

- 1. I have read the Nebraska Racetrack Gaming Act Sections 9-1101 through 9-1208 and administrative rules, plans and policies adopted or approved by the Commission (collectively "Rules"), and I understand the requirements of the Act and Rules.
- 2 I have read the minimum internal controls established or approved by the Commission for use by the gaming operator licensee ("Licensee") for which I am a key person, and I understand the requirements of the minimum internal controls, *OR*, I certify that the minimum internal control requirements do not apply to my job duties.
- 3. I have read the compulsive gambling assistance plan required by the Act and Commission rules and approved by the Commission for use by the Licensee, and I understand the requirements of the compulsive gambling assistance plan, *OR*, I certify that the compulsive gambling assistance plan requirements do not apply to my jobduties.
- 4. I understand and agree that, as a key person, I am responsible for the Licensee's compliance with the Act and Rules including, where applicable to my job duties, the minimum internal controls and compulsive gambling assistance plan.
- 5. I am signing this Certification with the knowledge that the Licensee and I will be subject to disciplinary action, including fines and/or revocation or suspension of the License, for failure to comply with the Act or Board rules including, where applicable to my job duties, requirements of the minimum internal controls and compulsive gambling assistance plan.

Printed Full Legal Name (Last, First, Middle)					
Signature (Must be notarized by notary public)				Date:	
State of)				
State of)				
Subscribed and sworn to before me by			and		
this day of ,					
My commission expires:		Signed:			
			Not	ary Public	

AFFIRMATION & CONSENT

I,

pplicant's Printed Name

as authorized agent of the Applicant, state under penalty of perjury that the entire Gaming Application, statements, attachments, and supporting schedules are true and correct to the best of my knowledge and belief, and that this statement is executed with the knowledge that misrepresentation or failure to reveal information requested may be deemed sufficient cause for the refusal to issue a gaming license or certification by the State of Nebraska. Further, I am aware that later discovery of an omission or misrepresentation made in the above statements may be grounds for the denial of a gaming license or certification or the revocation of the license or certification. I am voluntarily submitting this application on behalf of the Applicant to the Nebraska Racing and Gaming Commission under oath with full knowledge that I may be charged with perjury or other crimes for intentional omissions and misrepresentations pursuant to Nebraska law. I further consent to any background investigation necessary to determine the present and continuing suitability of the Applicant and that this consent continues as long as the Applicant holds a Nebraska gaming license or certification, and for 90 days following the expiration or surrender of such gaming license or certification. I understand that further information may be requested of the Applicant in regard to this application, and the Applicant agrees to supply such information upon request. I also agree that the Nebraska Racing and Gaming Commission shall be entitled to collect from the Applicant all fees, costs and expenses incurred in investigating this application.

Applicant's Business Name	Trade Name (DBA)
Printed Full Legal Name of Agent (Last, First, Middle)	Title
Signature	Date
orginatio	But
State of)	
) County of)	
Subscribed and sworn to before me by	and
this day of,	

My commission expires: ______ Signed: ______ Notary Public

[SEAL]

INVESTIGATION AUTHORIZATION (AUTHORIZATION TO RELEASE INFORMATION)

Applicant's Printed Name

Ι. .

, hereby authorize the Nebraska Racing and Gaming

Commission, its employees, and/or its designee (collectively, "Commission") to conduct a complete investigation into my personal background, using whatever legal means they deem appropriate. I hereby authorize any person or entity contacted by the Commission to provide any and all such information deemed necessary by the Commission. I hereby waive any rights of confidentiality in this regard.

I understand that by signing this authorization, a financial record check may be performed. I authorize any financial institution to surrender to the Commission a complete and accurate record of such transactions that may have occurred with that institution, including, but not limited to, present loan applications, financial statements and any other documents relating to my personal or business financial records in whatever form and wherever located.

I understand that by signing this authorization, a criminal history check will be performed. I authorize the Commission to obtain, maintain, and use from any source, any information concerning me contained in any type of criminal history record files, wherever located. I understand that the criminal history record files contain records of arrests that may have resulted in a disposition other than a finding of guilt (i.e., dismissed charges, or charges that resulted in a not guilty finding.) I understand that the information may contain listings of charges that resulted in suspended imposition of sentence, even though I successfully completed the conditions of said sentence and was discharged pursuant to law. I authorize the release of this type of information, even though this record may be designated as "confidential" or "nonpublic" under the provisions of state or federal law.

The Commission reserves the right to investigate all relevant information and facts to its satisfaction. I understand that the Commission may conduct a complete and comprehensive investigation to determine the accuracy of all information gathered. However, the State of Nebraska, the Commission, the commissioners, and other agents or employees of the State of Nebraska shall not be held liable for the receipt, use, or dissemination of inaccurate information from any source.

I, on behalf of the applicant, its legal representatives, and assigns, consent to the disclosure of information on the applicant by the board to any law enforcement or any regulatory agency of this or any other state, the government of the United States, any foreign country, or any Indian Tribe. I, on behalf of the applicant, its legal representatives, and assigns understand any information could include any information contained within my application, within any financial or personnel record, and information found or obtained from any source, and any information maintained by the Commission. I, on behalf of the applicant, its legal representatives, and assigns, hereby release, waive, discharge, and agree to hold harmless, and otherwise waive liability as to the State of Nebraska, the Commission, the commissioners, and other agents or employees of the State of Nebraska for any damages resulting from any use, disclosure, or publication in any manner, other than a willfully unlawful disclosure or publication, of any material or information acquired during inquiries, investigations, or hearings, and hereby authorize the lawful use, disclosure, or publication of this material or information.

Applicant's Business Name	Trade Name (DBA)
Printed Full Legal Name of Agent (Last, First, Middle)	Title
Signature of Authorized Agent	Date
State of)	
County of)	
Subscribed and sworn to before me by	and
this day of,	
My commission expires:Signed:	
	Notary Public

APPLICANT'S REQUEST TO RELEASE INFORMATION

TO: NRGC Use Only

FROM:

Applicant's PrintedName

ON BEHALF OF THE APPLICANT:

- 1. I hereby authorize and request a review, full disclosure, and release of any and all information, materials, and documents concerning the applicant requested by the Nebraska Racing and Gaming Commission ("Commission"), its agents, or employees, whether the information, materials, and documents are of a public, private, or confidential nature and whether the information, materials, and documents would otherwise be protected from disclosure by any constitutional, statutory or common law privilege.
- 2. I understand that by signing this request, a financial records check will be conducted. I authorize the person named above to release to the Commission, its agents, or employees, a complete and accurate record of the applicant's financial transactions, including but not limited to internal banking memoranda, past and present loan applications, checking account records, savings deposit records, safe deposit box records, securities transactions, and any other documents relating to the applicant's personal or business financial records in whatever form and wherever located.
- 3. I authorize the Commission, its agents, or employees to determine the person or entity to whom this request is to be presented and to insert that person's or entity's name in the appropriate location in this request.
- 4. I understand that the Commission, its agents, or employees will conduct a complete and comprehensive investigation to determine the validity of all information gathered. The Commission, the State of Nebraska, and the agents and employees of either, will not be held liable for inaccurate information.
- 5. If this request is not sufficient to obtain access to certain records, I understand that I or another authorized representative of the applicant may be asked to sign another appropriate authorization or release and that any failure to do so may be taken into consideration by the Commission, its agents, or employees in reviewing the application.
- 6. I understand that I may revoke this request in writing on behalf of the applicant, at any time and that the Commission, its agents, or employees may take the revocation into consideration in reviewing the application.
- 7. This request is valid for a period not to exceed 18 months from the date of execution.
- 8. I, for the applicant and its agents, administrators, successors, and assigns, hereby release the providers of the information collected pursuant to this request, and their agents and employees, from any and all liability arising out of or by reason of complying with this request.
- 9. A photocopy of this request will be considered as valid and effective as the original.
- 10. Upon receipt by the Commission of a written request indicating an application in another jurisdiction for a gaming related license or permit, I/we consent to the disclosure of confidential information compiled by the Commission in connection with my Commission application to any law enforcement or any regulatory agency in that other jurisdiction, including any other state, the government of the United States, foreign country or Indian Tribe.

Authorized Signature

Applicant's Business Name	Trade Name (DBA)
Printed Full Legal Name of Agent (Last, First, Middle)	Title
Signature of Authorized Agent	Date
State of)))	
County of)	
Subscribed and sworn to before me by	and
thisday of	
My commission expires:Signed:	
	Notary Public

NEBRASKA RACING AND GAMING COMMISSION

3401 Village Dr, Suite 100, Lincoln, NE 68516

REQUEST FOR FINANCIAL RECORDS AND RELEASE FROM LIABILITY

Name of Financial Institution		
Address		
City, State, Zip		
Re: Account Number:	Loan Number:	
Account Number:	Loan Number:	
	Loan Number: Loan Number:	
Account Number.		
REOUEST FOR FINANC	CIAL RECORDS AND RELEASE FROM LIABILITY	
	, does hereby request and direct	
pplicant's Business Name	, does hereby request and direct	
pecifically: copies of Signature Cards, previou	caming Commission, its agents, employees and/or designees our financial r as six (6) months Account Statements for checking and/or savings, current e, and complete payment history for each loan.	
rinted Name of Requesting Party	do hereby release, absolve and forever hold	
narmless your financial institution together with	its Agents and employees from any and all causes of action accrued to me as	a resul
aid disclosure of financial records.		
	Signature of Requesting Party	
	Title	
TATE OF)		
COUNTY OF)		
() () () () () () () () () () () () () (
ubscribed and sworn to before me this	_ day of, 20	
(SEAL)		
(carrier)	Notary Public	
	My Commission Expires:	<u> </u> .

ADDITIONAL REQUIREMENTS

BUSINESS PLAN

An applicant for a gaming operator's license must submit with the application a proposed business plan for the conduct of <u>gaming</u>. The plan must include, at a minimum, <u>all</u> of the following elements, <u>in the order shown below</u>.

- □ Architectural Plans and specifications. The plans, drawings, and specifications for the construction, furnishing, and equipping of the Gaming Facility, including, but not limited to, detailed specifications and illustrative drawings or models depicting the proposed size, layout and configurations of the component parts of the facility, including electrical and plumbing systems, engineering, structure, and aesthetic interior and exterior design as are prepared by one or more licensed professional architects and engineers.
- The total estimated construction cost of the gaming facility proposed by the applicant distinguishing between known costs and projections, and separately identifying:
 - (1) A facility design expense;
 - (2) Land acquisition or site lease costs;
 - (3) Site preparation costs;
 - (4) Construction cost or renovation cost;
 - (5) Equipment acquisition cost;
 - (6) Cost of interim financing;
 - (7) Organization, administrative and legal expenses; and
 - (8) Projected permanent financing costs.
- An estimated timetable for the proposed financing arrangements through completion of construction.
- The construction schedule proposed for completion of the Gaming Facility including therein projected dates for completion of construction and commencement of Gaming Activities and indicating whether the construction contract includes a performance bond.
- Explanation and identification of the source or sources of funds for the construction of the Gaming Facility.
- A general description of the type and number of Gaming Devices proposed for operation.
- Generic description of the games to be played on the machines and the proposed placement of the machines in the Gaming Facility.
- Proposed administrative, accounting, and internal controls procedures, including monetary control operations.
- A general promotion and advertising plan. A general description of the amounts, kinds and types of general promotion and advertising campaign(s) which will likely be undertaken by the applicant including information whether any national or regional advertising will occur, the medium(s) which may be used, the proposed market and whether any other facility or activity except the Gaming Facility will be included in such advertising.
- Proposed security plan in accordance with Chapter 6 of the Racetrack Gaming Rules.
- Proposed staffing plan for gaming operations, provided that such plan is updated at least one-hundred-twenty (120) days prior to the proposed opening date of the Gaming Facility to include the identification of those employees proposed for a position that may require a Level I Occupational License.
- Method to be used for prize payouts (i.e. annuity, lump sum, cash, reward credits).
- Details of any proposed progressive systems.
- Organizational chart depicting appropriate segregation of functions and responsibilities.
- Description of the duties and responsibilities of each position shown on the organizational chart.
- Written statement signed by the licensee's chief financial officer and either the licensee's chief executive officer or a licensed owner attesting that the system satisfies statutory requirements.
- ☐ If the written system is submitted by an applicant, a letter from an independent certified public accountant stating that the applicant's written system has been reviewed by the accountant and complies with statutory requirements.
- Staffing plan for gaming operations, including identification of key persons and employees.
- \Box Details of escrow account(s).
- Details of depository account for payment of gaming taxes.
- Gaming machine payment provisions including copies of all contracts to purchase gaming machines.
- Compulsive gambling assistance plan in accordance to Chapter 12 of the Rules and Regulations for Racetrack Gaming.
- Plans for training and deterring of a human tracking.
- □ Insurance requirement according to 3.018 of the Rules and Regulations for Racetrack Gaming.

RACETRACK GAMING OPERATOR LICENSE APPLICANTS $\Box 2$

All of the following documents must be submitted in the order shown below.

Current copy of license to conduct pari-mutuel wagering for the facility you will be operating at.

Schedule of live race days and live races during licensed race meets for the previous and current calendar years.

Attach copy of any business license, liquor license, or any other regulated license.

ADDITIONAL INFORMATION REQUIRED FOR GAMING OPERATORS LICENSE RELATING TO POSSESSION OF LICENSED PREMISES

Provide the following information if the applicant leases all or part of the proposed licensed premises. Use additional sheets, if necessary.

Name, address and brief statement of the nature of business of the lessor of the premises

Brief description of the material terms of the lease

Statement describing any business relationships between the applicant and the lessor other than the lease

If an applicant owns all or part of the premises on which gaming is proposed, fully disclose below complete information about the interest held by any other person, including an interest held under any mortgage, deed of trust, bond or any other instrument

Appendix A OWNERSHIP STRUCTURE EXAMPLE

DBF CASINO CORP — A privately h	eld company (Appl	icant)						
BF CASINO CORP. —A privately held company (Applicant) ffiliated Person Title O		Ownership	Effective Own.					
Sarah Braunis			50%	50%				
Dewey Cheatham			20%	20%				
Elvis Ganzemacher)%	0%				
TWF Gaming Inc.	Director		30%	30%				
Mervyn P. Merdstone	CEO	-	(50%)					
KMA Enterprises	CEO		(50%)	15% 15%				
Rhoda Reuter	0		. ,	15%				
Kiloda Keuler	Owner	,	((100%))	1370				
Name		Title	SSN/FEIN	Date of Bir		App Submitted?		
SARAH BRAUNIS		PRESIDENT	###########	##########		$X_{YES} \square NO$		
Address (city, state, zip)				Phone				
2323 MOCKINGBIRD LANE, YREK	A, CA 98000			(666) 666-1212				
Business Affiliated With (Parent business or sub-e	ntity)		Own. % in Business Affiliated	l With	With Effective Own. % in Applicant			
DBF CASINO CORP.			50.0%		50.0%			
Name		Title	SSN/FEIN	Date of Bir		App Submitted?		
DEWEY CHEATHAM		SHAREHOLDER	##########	########	##	$X_{YES} \square NO$		
Address (city, state, zip) 1616 COLFAX AVE., DENVER, CO	20222			Phone (303) 55	5 1222			
			Own. % in Business Affiliated)		
Business Affiliated With (Parent business or sub-entity) DBF CASINO CORP.			20.0%	20.0%		0wn. % in Applicant		
Name		Title	SSN/FEIN	Date of Bir	th	App Submitted?		
ELVIS GANZEMACHER		DIRECTOR	###########	######################################				
Address (city, state, zip)		•	•	Phone				
444 TROPICANA DR., LAS VEGAS,	NV 89111			(702)55	5-4444			
Business Affiliated With (Parent business or sub-e	ntity)		Own. % in Business Affiliated	With	Effective C	Own. % in Applicant		
DBF CASINO CORP.			0.0%		0.0%			
Name		Title	SSN/FEIN	Date of Bir	th	App Submitted?		
TWF GAMING INC.		SHAREHOLDER	##########	X Yes No		$X YES \square NO$		
Address (city, state, zip)				Phone				
2700 BROADWAY NE, JAL, NM 870				(505) 555-7879				
Business Affiliated With (Parent business or sub-entity)						Effective Own. % in Applicant		
DBF CASINO CORP.			30.0%		30.0%			
Name		Title	SSN/FEIN	Date of Bir		App Submitted?		
MERVYN P. MERDSTONE		CEO	###########	#######	##	$X YES \square NO$		
Address (city, state, zip)					Phone			
1313 BLUEVIEW TERRACE, ANTO	,	33		(505)55				
Business Affiliated With (Parent business or sub-entity)				Own. % in Business Affiliated With Effective Own. % in App		Own. % in Applicant		
TWF GAMING INC.		TH.	50.0% SSN/FEIN	Date of Bir	15.0%	App Submitted?		
Name KMA ENTERPRISES		Title SHAREHOLDER	SSN/FEIN ###########	Date of Bir	th	$X YES \square NO$		
Address (city, state, zip)		SILINEHOLDER		Phone				
2709 CALLE WISTFUL VISTA, GAL	LINA. NM 87567			(505)55	5-2456			
Business Affiliated With (Parent business or sub-entity)		Own. % in Business Affiliated With Effective Own. % in Appl		Wh. % in Applicant				
TWF GAMING INC.	.,		50.0%		15.0%			
Name		Title	SSN/FEIN	Date of Bir	th	App Submitted?		
RHODA REUTER		OWNER	#########	#######	##	$X_{YES} \square NO$		
Address (city, state, zip)				Phone		•		
4700 WEST 59TH ST, PIE TOWN, NM 87876				(505) 555-1616				
Business Affiliated With (Parent business or sub-entity)			Own. % in Business Affiliated	l With	11			
KMA ENTERPRISES		100.0% 15.0%						