

1. List owners prior to ownership change and include percentage: (Continued)

c. Last Name: _____
First Name: _____ MI: _____
Title: _____
Social Security #: _____-_____-_____
Number of Units Owned: _____ Percentage of LLC Ownership: _____%

2. List owners subsequent to ownership change and include percentages. Complete and submit the attached *Disclosure of LLC Members / Managers (GC4-017b)* form, and submit a new copy of your new LLC agreement.
(Attach additional sheets, if necessary.)

a. Last Name: _____
First Name: _____ MI: _____
Title: _____
Mailing Address: _____

City State Zip
Social Security #: _____-_____-_____ Number of Units Owned: _____
Percentage of LLC Ownership: _____% Date Acquired: ____/____/____

b. Last Name: _____
First Name: _____ MI: _____
Title: _____
Mailing Address: _____

City State Zip
Social Security #: _____-_____-_____ Number of Units Owned: _____
Percentage of LLC Ownership: _____% Date Acquired: ____/____/____

c. Last Name: _____
First Name: _____ MI: _____
Title: _____
Mailing Address: _____

City State Zip
Social Security #: _____-_____-_____ Number of Units Owned: _____
Percentage of LLC Ownership: _____% Date Acquired: ____/____/____

Managing Member Signature is Required – See Page 3 of Application

3. **If not previously submitted, all persons (and their spouses) who have a substantial interest in the LLC**, as defined by WAC 230-03-045, must complete the attached *Personal / Criminal History Statement* (BLS-700-301). Also, submit a new listing of all LLC members and spouses.

4. **Submit a copy of the LLC agreement authorizing this LLC ownership change, and copies of all documents setting out this sale, or unit transfer.** If the units were sold, the *Financial Statement* (BLS-700-303) and *Source of Funds Statement* (BLS-700-304) must be completed by the purchasers.

*** * * IMPORTANT * * ***

5. **If you are a new substantial interest holder, as part of this application, you are required to provide positive proof of identity.** To accomplish this requirement, submit along with this application, the following items. A copy of one of these official documents; a valid driver's license, a military identification card, a valid passport, or if you are registered alien – an alien registration card. **Ensure photograph is identifiable.** You may also be required to submit fingerprints; if so, fingerprint cards, with instructions, will be sent to you.

YOUR APPLICATION AND THE PUBLIC RECORDS ACT

From the moment we receive your application, it becomes a public document subject to the Public Records Act (RCW 42.56) and other Washington laws. The Commission may disclose to the public, other state or federal agencies, or discuss at a public meeting all information set forth in this application and all supplemental information submitted. The Commission responds to public document requests through a Public Disclosure Request process. In the event that the Commission receives a public disclosure request regarding this application or the license file established, you may request in writing, that the Commission notify you of such request as provided in RCW 42.56.540.

**DECLARATION / SIGNATURE
OF APPLICATION
(SOLE PROPRIETOR, LLC MANAGER, PARTNER, OR CHIEF EXECUTIVE OFFICER)**

I declare under penalty of perjury, under the laws of the state of Washington, that all information provided in this application is true and complete to the best of my knowledge. I understand that untruthful, misleading, or incomplete answers whether through misrepresentation, concealment, inadvertence, or mistake, are cause for denial of an initial application or revocation of any gambling licenses currently held. I further understand that if I voluntarily withdraw or if the commission administratively closes my application, the remainder of my fee, minus the commission's processing and investigative costs, will be refunded. I agree to notify the Washington State Gambling Commission should any information required on this application and / or on my *Personal / Criminal History Statement* change or become inaccurate in any way. I understand that if I fail to make such notification, it may constitute grounds for denial, suspension or revocation of my license. I further understand that if any criminal or civil actions are filed against me, I must inform the commission. (See WACs 230-03-050, 230-03-055, 230-06-080, 230-06-085, and 230-06-090.)

_____ |_|_|_|/|_|_|_|/|_|_|_|_|_|_|_|
Signature Date