



Washington State Gambling Commission
 Licensing Division
 P.O. Box 42400
 Olympia, WA 98504-2400

UBI NUMBER
LICENSE NUMBER

SOURCE OF FUNDS STATEMENT

AS OF: _____

NOTE: A separate Source of Funds Statement must be completed by the business and each individual who has provided funds to the business.

BUSINESS NAME (DBA or trade name)

THIS SOURCE OF FUNDS STATEMENT IS FOR: (Choose **either** No. 1 or No. 2)

1. AN INDIVIDUAL (can be joint for husband and wife)

I AM A: (Check appropriate boxes) SOLE PROPRIETOR SPOUSE PARTNER FINANCIER LLC MEMBER

CORP. OFFICER Title: _____ STOCKHOLDER (10% or more) OTHER: _____

NAME: Last First Middle

HOME MAILING ADDRESS: Street or Route

City	State or Country	Zip Code
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HOME / CELL PHONE ()	WORK PHONE ()	FAX NUMBER ()
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2. A BUSINESS ENTITY

BUSINESS ENTITY IS A: CORPORATION LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY

NAME OF BUSINESS ENTITY:

MAILING ADDRESS: Street or Route

City	State or Country	Zip Code
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HOME / CELL PHONE ()	WORK PHONE ()	FAX NUMBER ()
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OUTLINE OF COSTS

Please disclose ALL COSTS involved in opening the business. If you are making a change to your current business that already has a license, outline only the costs involved with this change to your business.
 Attach additional sheets if needed.

COSTS	DOLLAR AMOUNT
Real property purchase amount OR lease deposit plus first month's rent	\$
Stock / Shares	\$
Business assets (to include equipment, inventory, trade name, good will, etc.) OR the cost associated with opening the new business.	\$
Remodeling costs OR costs to change your currently licensed premise.	\$
Miscellaneous fees (such as license/gambling, legal/architectural, health/city-county permit, etc.) / Other	\$
GRAND TOTAL OF COSTS	\$

SOURCE OF FUNDS AND CERTIFICATION

Please explain carefully ALL funds used to get into business or change your current license. Your explanation needs to include all costs outlined on page 1 and should equal or exceed the Grand Total of Costs.
Attach additional sheets if needed.

DOLLAR AMOUNT	INSTRUCTIONS	EXPLANATION (Attach documentation of the following source of funds)
CASH PAID / CONTRIBUTION \$ _____	Explain the original source of the cash used (checking, savings, investment accounts, trust funds, money on hand, etc.). Explain where the cash is or was kept and the account number.	
CASH BORROWED / RECEIVED \$ _____	Explain where the cash was borrowed or received from (bank, finance company, credit card, insurance fund, personal loan or gift of money, etc.). Provide the name and address of the lender and the account loan number.	
DEFERRED CONTRACT \$ _____	Explain any amounts being carried on a contract (such as a purchase and sale agreement or seller carried promissory note).	
NON-CASH CONTRIBUTIONS \$ _____	Explain any non-monetary contributions, such as labor or equipment.	
TOTAL OF FUNDS \$ _____	This amount should equal or exceed the grand total of costs from Page 1.	

CERTIFICATION

I certify, under penalty of perjury, that this Source of Funds Statement represents my true source of funds status as of this date, and my contribution to this business. I hereby authorize investigation of my financial records and other sources as necessary for licensing.

Signature: _____

Print Name: _____

Date: _____