2023
NEW KEY EXECUTIVE LICENSE APPLICATION

Oklahoma Horse Racing Commission One Remington Place – Building B Oklahoma City, OK 73111 (405) 419-4441 *or* (405) 943-6472 www.ohrc.ok.gov

Office Use Only	
Effective	
FP	
Rec#	
Clerk	

LICENSE FEE: \$341 (250 Gaming + 50 Racing + 41 Fingerprint Processing Fee). An investigative fee of \$50.00 per hour plus expenses may apply, if so, it will be billed under separate cover.

• Application must be typewritten or **CLEARLY PRINTED** in black ink. All questions must be answered in full. If a question is not applicable, so state. **Applications which are not complete and legible will not be considered.**

• If space provided is not sufficient for complete answers or you wish to furnish additional information, attach additional sheets of the same size and number answers to correspond with the question.

• The enclosed various Release of Information/Liability forms, Military Personnel Records Form SF-180 (if applicable), two (2) Fingerprint Cards and your two (2) most recent years Federal and State tax returns must be completed and returned with this application.

• Please do not use extra staples, paperclips, or tabbed pages.

I. PERSONAL DATA

GAL NAME:			
	Last	First	Middle
OF GAMING EMPLOYER:			
S OF EMPLOYER:			
IVE POSITION YOU WILI	_ FILL:		
SS PHONE:()		
ISOR:			
		during what period and	under what circumstances were these
Have you ever legally	changed your na	me? NO YES_	Date. Place and Court
Date of Birth: Gender: Male			er:
Height:	Weight:	Race:	
Driver's License Numb	oer:	Sta	te issued:
	DF GAMING EMPLOYER: SS OF EMPLOYER: IVE POSITION YOU WILL SS PHONE:('ISOR: List all other names yes surname other than 'n names used? Have you ever legally Date of Birth: Gender: Male Height:	Last DF GAMING EMPLOYER: SS OF EMPLOYER: IVE POSITION YOU WILL FILL: SS PHONE:) TISOR: List all other names you have used, incompare other than your true name, names used? Have you ever legally changed your name Date of Birth: Gender: Male Female Height: Weight:	DF GAMING EMPLOYER:

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II. MARITAL STATUS

Sing	gle Mar	ried	Divorced		Separated	Wic	lowed
Monthly	/ Alimony: \$	Monthly Child	l Support: \$		Number o	f Children:	
		ш.	RESIDENCE				
Α.	Present Home Addres	S:					
		Street o	r PO Box Number, City	y, State, Zip	Code		
В.	Home Telephone: ()	c	ell: ()		
C.	Email Address:						

D. List chronologically all of your residences for the past 10 years, including addresses while attending school if away from home:

From	То	Street Address	City	State

IV. EDUCATION

Name of School	Location	From	То	Diploma/Degree
HIGH SCHOOL				
COLLEGE				
GRADUATE				
MISC.				

V. REFERENCES

List three references (not relatives, former employees, or fellow employees) who are responsible adults of reputable standing in their communities, such as property owners, business or professional persons, who have known you well during the past five years.

1.	Full Name			
	Mailing Address			
	Occupation		Number of Years	Acquainted
2.	Full Name			
	Mailing Address			
	Occupation		Number of Years	Acquainted
3.	Full Name			
	Mailing Address			
	Occupation		Number of Years	Acquainted
			_	
		VI. EMPLO	DYMENT	
List cl	hronologically all employme	ent for the last 10	years.	
1.	Company Name			
	Address, City, State, Zip			
	Employment Dates	Salary	Position	Reason for Leaving
				J
2.	Company Name			
	Address, City, State, Zip			
	 Employment Dates	Salary	Position	Reason for Leaving
3.	Company Name			
	Address, City, State, Zip			
	 Employment Dates	Salary	Position	Reason for Leaving

Α.

4.	Company Name			
	Address, City, State, Z	p		
	Employment Dates	Salary	Position	Reason for Leaving
5.	Company Name			
	Address, City, State, Z	p		
	Employment Dates	Salary	Position	Reason for Leaving
6.	Company Name			
	Address, City, State, Z	p		
		_		Reason for Leaving
	you ever been dismissed No Yes - Employers	or asked to resign	n from any employmer	nt or position that you have
Have	you ever been dismissed No Yes - Employers Explain: you ever held a privileg ving (please check): Liquor Real	or asked to resign Name: ed or professiona Estate Broker/Sal	a from any employmer	nt or position that you have
Have	you ever been dismissed No Yes - Employers Explain: you ever held a privileg ving (please check): Liquor Real Insurance Raci	or asked to resign	n from any employmer	nt or position that you have
Have	you ever been dismissed No Yes - Employers Explain: you ever held a privileg ving (please check): Liquor Real Insurance Raci	or asked to resign Name: ed or professiona Estate Broker/Sal ng (Dog/Horse)	a from any employmen	nt or position that you have
Have	you ever been dismissed No Yes - Employers Explain: you ever held a privileg ving (please check): Liquor Real Insurance Raci Gaming Lotte	or asked to resign Name: ed or professiona Estate Broker/Sal ng (Dog/Horse)	a from any employmen	nt or position that you have
Have	you ever been dismissed No Yes - Employers Explain: you ever held a privileg ving (please check): Liquor Real Insurance Raci Gaming Lotte	or asked to resign Name: ed or professiona Estate Broker/Sal ng (Dog/Horse)	a from any employmen	nt or position that you have

в.

С.

D. Have you ever held a financial interest in a gambling venture, in any state, including but not limited to; a racetrack (dog or horse), lottery, casino, off-track betting parlor, bookmaking operation, card room bingo parlor or pull tabs?

				-
No	Vac	Comn	lata	for

No Yes - Complete for all businesses in which you were involved.

Name of Business	Location	Partners	Partner's Address(es)	Date of operation

Ε. Have you ever been refused a gaming license or related finding of suitability or been a participant in any group which has been denied a gaming license or related finding of suitability?

Yes - Reason: ______

No

F. Have you ever been granted a gaming license or been a participant in any group which has been issued a gaming license by any state?

	No	Yes – Complete the following.
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License Type	Name of Establishment	Location	Period of Licensure	Disciplinary Actions

Do you have any relatives associated with or employed in the gaming industry (this includes State G. Lottery and Racing)?

Yes – Complete the following. No

Name of Relative	Relation	Address	Association or Employment	Date of Association or Employment

VII. CREDIT RECORD

Α.	Has your credit record ever been c	onsidered unsatisfactory, or have you ever be	en refused credit?
	No Yes – Provide da	tes, places, names of creditors and circumstar	nces:
в.	Are you indebted to anyone?		
	No Yes – Specify be	low.	
	Name	Mailing Address	Amount
		XIII. COURT RECORD	
	See OHRC Rules for Racetrack Gaming	g 325:80-5-6 General grounds for refusal to iss Gaming License applications	<u>ue license or denial of</u>
		ounning License applications	

A. Have you ever been questioned, detained, indicted, arrested or summoned to answer for any criminal offense or violation for any reason whatsoever, regardless of the disposition or the event, including traffic citations other than parking tickets?

Date	City/State	Charge	Final Disposition

B. Have you ever been or are you now on parole, probation or supervised release?

Yes – Specify below.

No Yes

No

No Yes –					
	Give details on add List all cases witho			and attach to t	his applicat
Has a criminal indictmo you were not arrested					ou, but for v
No Yes					
		ar to testif	y before a fede	ral, state or cou	inty grand j
No Yes					
Have you ever had a ci	vil or criminal reco	rd expung	ed by a court or	der?	
No Yes-	When?				
	Date		City	County	State
No Yes -	Specify below.	Date	City/State	Charge	Disposit
Have you ever been a pl	aintiff or defendant	in a court	action?		
	NO Yes Have you ever been su Board or commission? NO Yes Have you ever had a ci NO Yes - Has any member of you NO Yes -	NO Yes Have you ever been subpoenaed to appe Board or commission? NO Yes Have you ever had a civil or criminal reco NO Yes - When?	No Yes Have you ever been subpoenaed to appear to testif Board or commission? No Yes Have you ever had a civil or criminal record expung No Yes - When? Date Has any member of your family or close relative (inclue No Yes - Specify below.	No Yes Have you ever been subpoenaed to appear to testify before a feder Board or commission? No Yes Have you ever had a civil or criminal record expunged by a court or No Yes - When? Date City City Has any member of your family or close relative (including in-laws) eve No Yes - Specify below.	Have you ever been subpoenaed to appear to testify before a federal, state or cour Board or commission? No Yes Have you ever had a civil or criminal record expunged by a court order? No Yes - When?

IX.	ORGANIZATION N	MEMBERSHIP
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2	
3	
4	
5	
6	
7 Are you no movement which has violence to	ow, or have you ever been, a member of any foreign or domestic organization, asso t, group, or combination of persons which is totalitarian, fascist, communist, or subve adopted, or shows a policy of advocating for approving the commission of acts of o deny other persons their rights under the Constitution of the United States, or which
7 Are you no movement which has violence to	ow, or have you ever been, a member of any foreign or domestic organization, ass , group, or combination of persons which is totalitarian, fascist, communist, or subve adopted, or shows a policy of advocating for approving the commission of acts of
7 Are you no movement which has violence to	ow, or have you ever been, a member of any foreign or domestic organization, asso t, group, or combination of persons which is totalitarian, fascist, communist, or subve adopted, or shows a policy of advocating for approving the commission of acts of deny other persons their rights under the Constitution of the United States, or which orm of government of the United States by unconstitutional means?
7. Are you no movement which has violence to alter the fo	ow, or have you ever been, a member of any foreign or domestic organization, asso t, group, or combination of persons which is totalitarian, fascist, communist, or subve adopted, or shows a policy of advocating for approving the commission of acts of deny other persons their rights under the Constitution of the United States, or which orm of government of the United States by unconstitutional means?
7. Are you no movement which has violence to alter the fo	ow, or have you ever been, a member of any foreign or domestic organization, asso t, group, or combination of persons which is totalitarian, fascist, communist, or subve adopted, or shows a policy of advocating for approving the commission of acts of deny other persons their rights under the Constitution of the United States, or which orm of government of the United States by unconstitutional means?
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X. RELATIVES

All applicants must give COMPLETE INFORMATION concerning their relatives. If you have been married more than once, give the requested information concerning each former spouse.

FATHER:	Full Legal Name	
	Address	
	Age Place of Birth	Occupation
	Business Address	
MOTHER:	Full Legal Name	
	Address	
	Age Place of Birth	Occupation
	Business Address	
SPOUSE:	Full Legal Name	
	Address	
	Age Place of Birth	
	Business Address	
CHILDREN:	Full Legal Name	
	Address	
	Age Place of Birth	Occupation
	Business Address	

Continued on next page

Full Legal Name	
Address	
Age Place of Birth	Occupation
Business Address	
Full Legal Name	
Address	
Age Place of Birth	Occupation
Business Address	
Full Legal Name	
Address	
Age Place of Birth	Occupation
Business Address	
Full Legal Name	
Address	
Age Place of Birth	Occupation
Business Address	
Full Legal Name	
Address	
Age Place of Birth	Occupation
Business Address	

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XI. PHOTOGRAPH

Affix a color Photograph below. The photograph must be a minimum of 3"x2" and must have been taken within the past three months. Please print your name on the back of photo.

Tape Photo Here

XII. TAX RECORDS

Provide complete copies of your previous two (2) years Federal and State tax returns

OKLAHOMA HORSE RACING COMMISSION ONE REMINGTON PLACE – BUILDING B OKLAHOMA CITY, OK 73107 (405) 419-4441 *or* (405) 427-1371 www.ohrc.org

AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

Instructions for required verification of United States citizenship <u>OR</u> **qualified alien status in the United States:** All natural persons fourteen (14) years of age or older and present in the United States, applying for a license with the Oklahoma Horse Racing Commission are required, by the provisions of 56 O.S. Supp. 2007 § 71, to provide the Commission with verification of lawful presence in the United States by executing one of the statements below.

l,(PRINT Ap			, of lawful age,
(PRINT Ap	plicant's Full Legal Name)		
being first duly sworn, upon oath s	tates, under pena	lty of perjury, as follo	ws:
I am a United States	citizen.		
-		Immigration and Natu	
		d States. <u>Provide a le</u> Alien Registration (fro	
			•
		I will not be present	in the United
States during the tim	e of my licensure.		
Applicant's Signature		NOTARY PUBLIC	
Signed or attested before me this	day of _		, 20
_			
(NOTARY SEAL)	My Commissior	expires:	
		•	
			OHRC298LIC/LED 7-15-16 LCF
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COMPLIANCE STATEMENT

By acceptance of a license issued pursuant to this application, I agree to comply with the rules of the Oklahoma Horse Racing Commission (OHRC); the laws of the United States of America, the State of Oklahoma, Municipalities and other subdivisions thereof, and agree to permit personnel of the OHRC to search my vehicle(s), any premise which I may occupy or control or have the right to occupy or control and my personal property and effects including a personal search while within the enclosure of the racetrack and/or gaming facility, and the seizure of any article, the having of which within such enclosure may be forbidden by law or Commission Rules. I further agree to permit personnel of the OHRC to remove from the above listed areas any item(s) they deem relevant to their investigation. It is understood that I will receive a receipt from OHRC for any and all items thus removed. I further understand that any items so removed by the OHRC may be used in a court of law or Board of Stewards Hearing during a criminal prosecution or an administrative proceeding. I am giving this written permission to the OHRC freely and voluntarily.

I hereby request and authorize the OHRC to conduct an official investigation of my personal history and background. I understand that any investigation, the application and any information submitted with relation to my application, are subject to the Open Records Act of Oklahoma and shall be treated in accordance as such. I understand that, except where specific State or Federal statute creates a confidential privilege, persons who submit information to public bodies have no right to keep this information from public access, nor reasonable expectation that this information will be kept from public access. I understand that my fingerprints will be taken and submitted to the Federal Bureau of Investigation (FBI) and the Oklahoma State Bureau of Investigation (OSBI) for a Criminal Records Report. I understand that I have the right to challenge inaccurate information I should contact the agency or entity that provided the information, or I can challenge the information with the FBI. I understand that I can obtain information on how to challenge inaccuracies at <u>www.fbi.gov</u>. I understand the FBI will retain my fingerprints and associated information/biometrics and, while retained, my fingerprints will continue to be compared against other fingerprints submitted to or retained by the FBI.

I hereby certify that the information and statements I have provided herein are true and correct. I further certify that I understand all of the statements above and further authorize all consumer reporting agencies to release to the OHRC any information requested by them in connection with the background investigation and processing of this application. I understand that failure to disclose all information completely and accurately may result in refusal to issue, denial, suspension, revocation or cancellation of this license and/or other disciplinary action by the Board of Stewards and/or the Commission. I have read and understand the foregoing statements and conditions and knowingly and voluntarily attach my signature hereunto.

		PRINTED Applicant's Name
		Applicant's SIGNATURE
STATE OF)		
COUNTY OF)		
Subscribed and sworn to before me this	_ day of	, 20
(SEAL)		Notary Public
My Commission Expires:		
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STATE OF)	
) SS:	
COUNTY OF)	

_____, of lawful age, being first duly sworn upon oath, deposes and says: *Printed Name of Applicant*

As an applicant for a Key Executive License (Oklahoma Horse Racing Commission), I have read the questions in the foregoing application and have answered them truthfully, fully, and completely. I hereby authorize educational and other institutions, my references, employers, business and professional associates, all governmental agencies and instrumentalities and all consumer reporting agencies to release to the Law Enforcement Division of the Oklahoma Horse Racing Commission or any of its Agents any information, files, records, or credit reports requested by the Law Enforcement Division of the Oklahoma Horse Racing of this application.

		PRINTED Applicant's Name
		Applicant's SIGNATURE
Subscribed and sworn to before me this	day of	, 20
(SEAL)		
		Notary Public

My Commission Expires: ______.

OKLAHOMA HORSE RACING COMMISSION ONE REMINGTON PLACE – BUILDING B OKLAHOMA CITY, OK 73111 (405) 419-4441 *or* (405) 943-6472

REQUEST FOR FINANCIAL RECORDS AND RELEASE FROM LIABILITY

,, do hereby request and direct tha	t
Printed Name of Requesting Party	
make availab	le
Printed Name and Address of Financial Institution holding records	
to the Director of Law Enforcement for the Oklahoma Horse Racing Commission, all of my financial records, includi	ng
but not limited to: Signature Cards, Checks, Drafts, Statements, Ledger Cards, Deposit Tickets, and any other financi	ial
nformation pertaining to any of my checking accounts, savings accounts, past and/or present loans, or oth	er
business dealings.	
de berehu release, absolue and fereuer held bermless	
do hereby release, absolve and forever hold harmless	_
together with its agents and employees from any and all causes of action accrued to me as a result of said disclosu	re
of financial records.	
Signature of Requesting Party	
STATE OF	
STATE OF)	
COUNTY OF)	
Subscribed and sworn to before me this day of, 20, 20	
(SEAL) Notary Public	
My Commission Expires:	

(Use Additional Forms as needed for EACH institution.)

OKLAHOMA HORSE RACING COMMISSION

ONE REMINGTON PLACE – BUILDING B OKLAHOMA CITY, OK 73107 (405) 419-4441 or (405) 943-6472

REQUEST FOR CREDIT RECORDS AND RELEASE FROM LIABILITY

I,	, do hereby request and direct that the
Printed Name of Requesting Party	
Credit Bureau of Oklahoma City make available to the Director Commission, all of my financial records, including but not limite Statements, Ledger Cards, Deposit Tickets, and any other finan	d to: Credit Reports, Signature Cards, Checks, Drafts,
I do hereby release, absolve and forever hold harmless the Crea and employees from any and all causes of action accrued to me	
	Signature of Requesting Party
Date of Birth: Social Security Nu	mber:
STATE OF)	
Subscribed and sworn to before me this day of	, 20
(SEAL)	Notary Public
My Commission Expires:	

OKLAHOMA HORSE RACING COMMISSION

ONE REMINGTON PLACE – BUILDING B OKLAHOMA CITY, OK 73111 (405) 419-4441 *or* (405) 943-6472

REQUEST FOR EDUCATIONAL & DISCIPLINARY RECORDS AND RELEASE FROM LIABILITY

		, do hereby request and direct that
Printed Nan	ne of Requesting Party	
Printed Name and Address of Educ		make available to
Frinted Nume and Address of Edd		
		Racing Commission, all records in the possession of the sciplinary actions, or any other matter pertaining to my
I do hereby release, absolve, and fo	prever hold harmless	
		Name of Educational Institution
together with its agents and emplo disclosure of records.	yees from any and all caus	ses of action which may accrue to me as a result of said
		Signature of Requesting Party
Date of Birth:	_ Social Security Number:	
STATE OF)	
STATE OF COUNTY OF) 55:	
Subscribed and sworn to before me	e this day of	, 20
(SEAL)		
()		Notary Public
My Commission Expires:		