2023 RENEWAL 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: \$300 (250 Gaming + 50 Racing).

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 must be completed with this application.
- Please do not use extra staples, paperclips, or tabbed pages.

I. PERSONAL DATA

FULL LEGAL NAME	:		
	Last	First	Middle
Date of Birth:		Social Security Num	ber:
Gender: M	ale Female	Place of Birth:	
Height:	Weight:	Race:	
Driver's License N	umber:	State issued:	
Present Home Add	dress:Street o	or PO Box Number, City, State, Zi	ip Code
)
Email Address:			
	II.	MARITAL STATUS	
No Yes	Since the date of your last current marital status belo	• •	rital status changed? If YES, choose your
	Single Marrie	d Divorced	Separated Widowed
Monthly Alim	ony: \$ Month	nly Child Support: \$	Number of Children:

III. EMPLOYMENT

NAME C	F GAMING EM	PLOYER:					
ADDRES	S OF EMPLOYE	R:					
EXECUT	IVE POSITION Y	OU WILL FI	LL:				
BUSINES	SS PHONE:	()				
SUPERV	ISOR:						
А.	Since the date of your last application, have you held a financial interest in a gambling ventur state, including but not limited to; a racetrack (dog or horse), lottery, casino, off-track bettin bookmaking operation, card room bingo parlor or pull tabs? No Yes - Complete for all businesses in which you were involved.				•		
	Name of Busir	ness Lo	ocation	Partners	Partner's Addr	ress(es)	Date of operation
В.		peen a parti	cipant in any	n, have you been refus group which has been o	denied a gaming lice	ense or rela	_
C.		ich has beei		, have you been granted ning license by any state following.		r been a pa	rticipant in
	License Type	Name of E	stablishment	Location	Period of Licensure	Disciplinar	y Actions
				I	1		

D.	Since the date of your last application, do you have any relatives associated with or employed in the gaming industry (this includes State Lottery and Racing)?				
	No Yes – Complete the following.				
	Name of Relati	ve Relation	Association or Address Employment	Date of Association or Employment	
		IV	. CREDIT RECORD		
		ast application, has you	ur credit record been considered unsati	sfactory, or have you ever	
been re	fused credit?	Provide dates nlaces n	ames of creditors and circumstances:		
	,	Tovide dates, places, ii	unies of creations and encounstances.		
		V.	. COURT RECORD		
<u>See</u>	OHRC Rules for	_	:80-5-6 General grounds for refusal to i	ssue license or denial of	
Α.	Since the date of your last application, have you 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?				
	No	Yes – Specify below	ı.		
	Date	City/State	Charge	Final Disposition	
В.	Are you curre	ntly on narole probat	ion or supervised release?	,	
ь.	No [Yes	ion of superviseu release:		
C.	Have you rece	eived a pardon for any			
	No Yes – Give details on additional information sheet and attach to this application List all cases without exception.				

Page 3 of 7

Has a criminal indictment you were not arrested of		=			u, but for which
No Yes					
Have you been subpoer Board or commission?	naed to appear to	testify bef	ore a federal, st	ate or county g	rand jury,
No Yes					
Since the date of your la	ast application, h	ave you ha	d a civil or crimi	nal record expu	inged by a court
No Yes - W	/hen?				
	Date		City	County	State
Name		Date	City/State	Charge	Disposition
No Yes – S	Specify below.				
Name	Relationship	Date	City/State	Charge	Disposition
	it application, have live date, place, co inal disposition be	urt, names			

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.

(PR		, of lawful ag
(PR	(INT Applicant's Full Legal Name)	
ng first duly sworn, upon oa	ath states, under penalty	of perjury, as follows:
I am a United St	ates citizen.	
and I am lawfull your Passport /	ly present in the United S Visa (including I-94) / Alio	migration and Naturalization Act, states. Provide a legible copy of en Registration (front and back).
	ed States Citizen <u>AND</u> I we time of my licensure.	vill not be present in the United
Applicant's Sig	gnature	NOTARY PUBLIC
ned or attested before me th	is day of	, 20
(NOTARY SEAL)	My Commission ex	xpires:
		OHRC298LIC/LED 7-15-1

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 on said Report and have it corrected. I understand that if I believe the Criminal Records Report contains 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 www.fbi.gov. 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) SS:		
Subscribed and sworn to before me this	day of	, 20
(SEAL)		
		Notary Public
My Commission Expires:	<u>.</u>	

STATE OF)	
STATE OF	
, of lawful Printed Name of Applicant	age, being first duly sworn upon oath, deposes and says
questions in the foregoing application and have a authorize educational and other institutions, associates, all governmental agencies and inst release to the Law Enforcement Division of the O	Oklahoma Horse Racing Commission), I have read the inswered them truthfully, fully, and completely. I hereby my references, employers, business and professional trumentalities and all consumer reporting agencies to Oklahoma Horse Racing Commission or any of its Agents ts requested by the Law Enforcement Division of the on with the processing of this application.
	PRINTED Applicant's Name
	Applicant's SIGNATURE
Subscribed and sworn to before me this da	y of, 20
(SEAL)	
	Notary Public
My Commission Expires:	·