



# Arizona Department of Revenue • Bingo Section

1600 West Monroe, Phoenix, AZ 85007 • (602) 716-7801

## AFFIDAVIT

This affidavit must be completed by each person who wishes to assist in the conduct of any game of bingo. If any information is blank or incorrect, the affidavit will be returned to you. All information is subject to verification. Disclosure of your Social Security Number is voluntary. This information may be used to establish positive identification for purposes of criminal background checks pursuant to Arizona Revised Statutes, §5-404.

Please type or print in black ink.

LICENSEE'S NAME <b>PRESCOTT MOOSE 319</b>	LICENSE NUMBER
POSITION Check the appropriate boxes: <input checked="" type="checkbox"/> Manager <input checked="" type="checkbox"/> Supervisor <input checked="" type="checkbox"/> Proceed Coordinator <input checked="" type="checkbox"/> Assistant	

AFFIANT'S NAME <b>Richard CANTERE</b>		SOCIAL SECURITY NO.
ADDRESS <b>669 Pine COURT</b>		DATE OF BIRTH
CITY <b>Chino Valley</b>	STATE <b>AZ</b>	ZIP CODE <b>86363</b>
HOME PHONE NO. (with area code) <b>928-925-8637</b>	WORK PHONE NO. (with area code) <b>928-772-3701</b>	

If licensee is a qualified organization, complete the following section:

MEMBER? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	DATE JOINED ORGANIZATION <b>02/31/1971</b>
OFFICERS? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	OFFICER TITLE <b>ADMINISTRATOR</b>
DO YOU HAVE AN AFFIDAVIT ON FILE FOR ANY OTHER LICENSEE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", list license number(s): <b>LIQUOR LICENSE# 14133022</b>	

I, Richard CANTERE, the above named affiant, under penalty of perjury, upon oath, depose and say that I will conduct or assist in conducting all bingo games in compliance with the terms of the license, Arizona Revised Statutes, Title 5, Chapter 4, and the rules of the licensing authority. I am of good moral character and have never been convicted of any misdemeanor involving moral turpitude or felony. I have not and shall not receive any reward, compensation or recompense for my participation in the conduct of bingo games except as provided for by law. I hereby swear or confirm that I have read and understand the foregoing and verify that the information and statements made herein are true and correct to the best of my knowledge.

Richard Cantere  
SIGNATURE OF AFFIANT

DATE



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Please type or print in black ink.

LICENSEE'S NAME <i>MOOSE Lodge 319</i>	LICENSE NUMBER
POSITION	
Check the appropriate boxes: <input type="checkbox"/> Manager <input type="checkbox"/> Supervisor <input type="checkbox"/> Proceed Coordinator <input checked="" type="checkbox"/> Assistant	

AFFIANT'S NAME <i>Rod Taylor</i>	SOCIAL SECURITY NO.
ADDRESS <i>4308 Calle Santa Cruz</i>	DATE OF BIRTH
CITY <i>Prescott Valley, AZ</i>	STATE <i>AZ</i>
ZIP CODE <i>86314</i>	
HOME PHONE NO. (with area code) <i>928 772-6783</i>	WORK PHONE NO. (with area code) <i>888-741-7471</i>

If licensee is a qualified organization, complete the following section:

MEMBER? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	DATE JOINED ORGANIZATION <i>4-989</i>
OFFICERS? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	OFFICER TITLE
DO YOU HAVE AN AFFIDAVIT ON FILE FOR ANY OTHER LICENSEE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes", list license number(s):	

I, *Rod Taylor*, the above named affiant, under penalty of perjury, upon oath, depose and say that I will conduct or assist in conducting all bingo games in compliance with the terms of the license, Arizona Revised Statutes, Title 5, Chapter 4, and the rules of the licensing authority. I am of good moral character and have never been convicted of any misdemeanor involving moral turpitude or felony. I have not and shall not receive any reward, compensation or recompense for my participation in the conduct of bingo games except as provided for by law. I hereby swear or confirm that I have read and understand the foregoing and verify that the information and statements made herein are true and correct to the best of my knowledge.

*Rod Taylor*  
SIGNATURE OF AFFIANT

*1-16-2012*  
DATE

DDN



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LICENSEE'S NAME <u>PRESCOTT MOOSE 319</u>	LICENSE NUMBER
POSITION Check the appropriate boxes: <input type="checkbox"/> Manager <input type="checkbox"/> Supervisor <input type="checkbox"/> Proceed Coordinator <input checked="" type="checkbox"/> Assistant	

AFFIANT'S NAME <u>DON ROSE</u>	SOCIAL SECURITY NO.
ADDRESS <u>4701 N STALLION D</u>	DATE OF BIRTH
CITY <u>PRESCOTT</u>	STATE <u>AZ</u>
	ZIP CODE <u>86314</u>
HOME PHONE NO. (with area code) <u>520-775-3013</u>	WORK PHONE NO. (with area code) <u>RETIRED</u>

If licensee is a qualified organization, complete the following section:

MEMBER? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	DATE JOINED ORGANIZATION <u>9.28.11.99.8</u>
OFFICERS? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	OFFICER TITLE
DO YOU HAVE AN AFFIDAVIT ON FILE FOR ANY OTHER LICENSEE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", list license number(s): <u>Liquor 14133022</u>	

I, DONALD D. ROSE, the above named affiant, under penalty of perjury, upon oath, depose and say that I will conduct or assist in conducting all bingo games in compliance with the terms of the license, Arizona Revised Statutes, Title 5, Chapter 4, and the rules of the licensing authority. I am of good moral character and have never been convicted of any misdemeanor involving moral turpitude or felony. I have not and shall not receive any reward, compensation or recompense for my participation in the conduct of bingo games except as provided for by law. I hereby swear or confirm that I have read and understand the foregoing and verify that the information and statements made herein are true and correct to the best of my knowledge.

Donald D. Rose  
SIGNATURE OF AFFIANT

1-7-12  
DATE

2/2/11



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Please type or print in black ink.

LICENSEE'S NAME <u>PRESCOTT MOORE 319</u>	LICENSE NUMBER
POSITION Check the appropriate boxes: <input type="checkbox"/> Manager <input type="checkbox"/> Supervisor <input type="checkbox"/> Proceed Coordinator <input checked="" type="checkbox"/> Assistant	

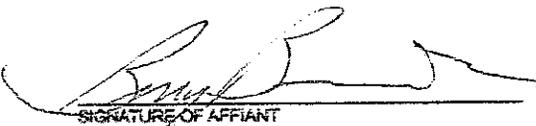
AFFIANT'S NAME <u>BERRY BOUNDS</u>	SOCIAL SECURITY NO.
ADDRESS <u>716 N LAKEVIEW DR</u>	DATE OF BIRTH
CITY <u>PRESCOTT</u>	STATE <u>AZ</u>
HOME PHONE NO. (with area code) <u>928 777-8596</u>	ZIP CODE <u>86301</u>
WORK PHONE NO. (with area code) <u>RETIRED</u>	

If licensee is a qualified organization, complete the following section:

MEMBER? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	DATE JOINED ORGANIZATION
OFFICERS? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	OFFICER TITLE
DO YOU HAVE AN AFFIDAVIT ON FILE FOR ANY OTHER LICENSEE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes", list license number(s):	

  
AFFIANT'S NAME

the above named affiant, under penalty of perjury, upon oath, depose and say that I will conduct or assist in conducting all bingo games in compliance with the terms of the license, Arizona Revised Statutes, Title 5, Chapter 4, and the rules of the licensing authority. I am of good moral character and have never been convicted of any misdemeanor involving moral turpitude or felony. I have not and shall not receive any reward, compensation or recompense for my participation in the conduct of bingo games except as provided for by law. I hereby swear or confirm that I have read and understand the foregoing and verify that the information and statements made herein are true and correct to the best of my knowledge.

  
SIGNATURE OF AFFIANT

Jan 16, 2011  
DATE



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Please type or print in black ink.

LICENSEE'S NAME <u>PRESCOTT MOOSE 319</u>	LICENSE NUMBER
POSITION Check the appropriate boxes: <input type="checkbox"/> Manager <input type="checkbox"/> Supervisor <input type="checkbox"/> Proceed Coordinator <input checked="" type="checkbox"/> Assistant	

AFFIANT'S NAME <u>KEITH SULLIVAN</u>	SOCIAL SECURITY NO.
ADDRESS <u>7805 E LARKSPUR LN</u>	DATE OF BIRTH
CITY <u>PRESCOTT</u>	STATE <u>AZ</u>
HOME PHONE NO. (with area code) <u>520-772-5715</u>	ZIP CODE <u>86314</u>
WORK PHONE NO. (with area code)	

If licensee is a qualified organization, complete the following section:

MEMBER? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	DATE JOINED ORGANIZATION
OFFICERS? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	OFFICER TITLE <u>TRUSTEE</u>
DO YOU HAVE AN AFFIDAVIT ON FILE FOR ANY OTHER LICENSEE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", list license number(s): <u>Liquor 14133022</u>	

I, KEITH SULLIVAN, the above named affiant, under penalty of perjury, upon oath, depose and say that I will conduct or assist in conducting all bingo games in compliance with the terms of the license, Arizona Revised Statutes, Title 5, Chapter 4, and the rules of the licensing authority. I am of good moral character and have never been convicted of any misdemeanor involving moral turpitude or felony. I have not and shall not receive any reward, compensation or recompense for my participation in the conduct of bingo games except as provided for by law. I hereby swear or confirm that I have read and understand the foregoing and verify that the information and statements made herein are true and correct to the best of my knowledge.

Keith Sullivan  
SIGNATURE OF AFFIANT

1-18-12  
DATE