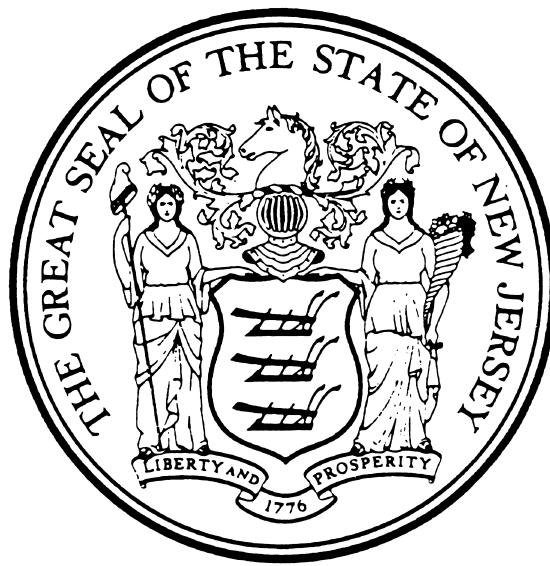


STATE OF NEW JERSEY
Division of Gaming Enforcement



NEW JERSEY SUPPLEMENTAL FORM
TO THE MULTI-JURISDICTIONAL BUSINESS FORM
Casino Company
Casino Service Industry Enterprise
Casino Holding and Intermediary Company

New Jersey Supplemental Form
to the Multi-Jurisdictional Business Form

This form is a supplement to the MULTI-JURISDICTIONAL BUSINESS FORM. If you are using the Multi-Jurisdictional Business Form to apply for qualification in more than one jurisdiction, and one of those jurisdictions is New Jersey, you are required to file this supplemental form as part of your New Jersey application. The other jurisdictions where you are filing may also have supplemental forms, and it is your responsibility to obtain these forms and make the appropriate filings. Copies of the forms used in New Jersey are available on the Internet at <http://www.nj.gov/oag/ge/forms.html> or you may request that the forms be mailed to you by calling (609) 441-3846.

IMPORTANT – PLEASE NOTE THAT AS PART OF YOUR NEW JERSEY APPLICATION, A SEPARATE MULTI-JURISDICTIONAL BUSINESS FORM AND NEW JERSEY SUPPLEMENTAL FORM MUST BE SUBMITTED BY THE CASINO COMPANY, CASINO SERVICE INDUSTRY ENTERPRISE (CSIE) AND EACH HOLDING AND INTERMEDIARY COMPANY DEEMED TO BE A QUALIFIER BY THE DIVISION OF GAMING ENFORCEMENT.

Name of Applicant _____

Additional Information for Multi-Jurisdictional Business Form

For the following questions on the Multi-Jurisdictional Business Form, please provide additional information as noted below:

SECTION A – APPLICANT GENERAL INFORMATION

A3. Provide the contact home and mobile numbers, with country/area code.

Primary Contact Home Telephone Number

Primary Contact Cell Telephone Number

Alternate Contact Home Telephone Number

Alternate Contact Cell Telephone Number

A17. Using the space below, include the terms, conditions, rights and privileges of all classes of voting, nonvoting and security or other ownership interest issued, and the number of outstanding shares. If the right of holders of any class of security may be modified otherwise than by a vote of a majority or more of the outstanding shares so affected, voting as a class, so state and explain briefly.

SECTION B – APPLICANT TRACK RECORDS

B3. In Attachment B3, describe the nature, type, terms, covenants, conditions and priorities of all outstanding bonds, loans, mortgages, notes, debentures, or other forms of indebtedness issued or executed, including loans made by shareholders, or to be issued or executed by the business entity, which mature more than one year from the date of issuance or which, by their terms, are renewable for a period of more than one year from the date of issuance (or, in the space below, provide a specific cross-reference to the applicable document(s) filed with this application that contain(s) all of the requested information). Do not limit to the past 5 years.

B4. Provide the requested information regarding individuals being compensated more than \$250,000 as Attachment B4. In addition, provide as Attachment B4a, a list setting forth the names, positions and amount of compensation for individuals being compensated between \$150,000 and \$250,000.

B5. Provide the requested details with respect to each bank, savings and loan association or other financial institution, whether domestic or foreign. In addition, provide in Attachment B5, the details as requested in question B5 on the Multi-Jurisdictional Business Form for any nominee of the business entity or entity under indirect control of the business entity.

B6. In Attachment B6, provide the following information for all other securities held by the business entity. Include any ownership interests more than 5%.

NAME AND ADDRESS OF COMPANY	TYPE OF SECURITIES OR OTHER OWNERSHIP INTEREST HELD	PURCHASE PRICE PER SHARE OR INTEREST	NUMBER OF SHARES HELD	% OF OWNERSHIP MORE THAN 5%
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B9. In Attachment B9, provide the following information for each person or entity holding any outstanding bonds, mortgages, trust deeds, notes, debentures, or other forms of indebtedness, regardless of amount, executed or issued by the business entity, which mature more than one year from the date of issuance or which, by their terms, are renewable for a period of more than one year from the date of issuance. (Note: Some or all of the persons or entities may be required to submit a completed Multi-Jurisdictional Personal History Disclosure Form or Multi-Jurisdictional Business Form, as applicable, and corresponding New Jersey Supplemental Form.) Do not limit to the past 5 years.

NAME AND ADDRESS	DATE OF BIRTH	TYPE AND CLASS OF DEBT INSTRUMENT HELD	DOLLAR AMOUNT OF DEBT HELD (Both Original Amount and Current Balance)
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B11. Provide the requested information regarding bonus or similar plans in Attachment B11. In Attachment B11a, include material features and methods of financing the plan, classes of participants, approximate number of persons in each class and amounts distributed to each class of persons during the last fiscal year.

SECTION C – APPLICANT COMPLIANCE RECORDS

C7. Regarding any insolvency appointments, in the details field, include the name of the person appointed, the court, and the reason for appointment.

C9. Provide the requested information in Attachment C9.

- In Attachment C9a, provide annual reports of the business entity that were submitted to shareholders or other persons during the last five years, if not already submitted in response to C9.
- In Attachment C9b, provide a copy of the last quarterly, unaudited financial statements prepared by or for the business entity.
- In Attachment C9c, provide a copy of any current report prepared due to the occurrence of any of the following events: change in control of the business entity; acquisition or disposition of assets; bankruptcy or receivership proceedings; changes in the business entity's certifying accountant or other material events.

New Jersey Supplemental Questions

NJ1. Provide as Attachment NJ1, addresses from which the business entity is or will be conducting any business, as part of an agreement with a casino hotel.

NJ2. For each incorporator or founding person of the business entity, provide as Attachment NJ2 the name, last known address, occupation(s) and date of birth.

NJ3. COMPENSATION OF OFFICERS AND DIRECTORS

Provide as Attachment NJ3 the following information regarding the amount of total annual compensation received during the last calendar year and the amount to be received during the subsequent calendar year by each director, trustee, and officer of the business entity, whether such compensation is in the form of salary, wages, commissions, fees, securities or other ownership interest, bonuses or otherwise, unless the information is already included in the response to question B4.

NAME	COMPENSATION LAST CALENDAR YEAR	COMPENSATION SUBSEQUENT CALENDAR YEAR	FORM OF COMPENSATION
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NJ4. NONVOTING SHAREHOLDERS

Provide as Attachment NJ4 the following information for each person or entity holding of record or having a beneficial interest in any nonvoting securities or other ownership interest issued by the business entity. This information must be provided as of a date no more than 60 days prior to the date of this application. (Note: If the business entity submitting this form is an applicant for a casino or CSIE license, or is a nonpublic holding or intermediary company of such an applicant, then a completed Multi-Jurisdictional Personal History Disclosure Form or Multi-Jurisdictional Business Form, as applicable, and corresponding New Jersey Supplemental Form may be required to be filed for each person or entity holding or having a beneficial interest in the nonvoting securities or other ownership interest of the business entity. If the business entity submitting this form is a publicly-traded holding company of an applicant for a casino or CSIE license, then a completed Multi-Jurisdictional Personal History Disclosure Form or Multi-Jurisdictional Business Form, as applicable, and corresponding New Jersey Supplemental Form must be filed for each person or entity holding or having a beneficial interest in the nonvoting securities or other ownership interest of the business entity, unless the Division has granted a waiver of the qualification requirement as to such person or entity).

NAME AND HOME ADDRESS	DATE OF BIRTH	CLASS OF NONVOTING SECURITIES OR OTHER OWNERSHIP INTEREST HELD	NUMBER OF SHARES HELD	% OF OUTSTANDING NONVOTING SECURITIES OR OTHER OWNERSHIP INTEREST HELD
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NJ5. OTHER INDEBTEDNESS AND SECURITY DEVICES

Provide as Attachment NJ5, a description of the nature, type, terms, conditions and covenants of any other outstanding evidence of indebtedness or security device, such as trust deeds, pledges or lines of credit, utilized by the business entity, other than those described in response to question B3 (or, in the space below, provide a specific cross-reference to the applicable document(s) filed with this application that contain(s) all of the requested information).

NJ6. HOLDERS OF OTHER INDEBTEDNESS

Provide as Attachment NJ6 the following information with respect to each holder of any outstanding evidence of indebtedness or security device described in response to NJ5. (Note: Some or all of the persons listed in response to this question may be required by the Division to submit a completed Multi-Jurisdictional Personal History Disclosure Form or Multi-Jurisdictional Business Form, as applicable, and corresponding New Jersey Supplemental Form.)

NAME AND ADDRESS	DATE OF FORMATION/ DATE OF BIRTH	TYPE OF DEBT INSTRUMENT HELD	DOLLAR AMOUNT OF DEBT HELD (Both Original Amount and Current Balance)
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NJ7. SECURITIES OPTIONS

- A. Provide as Attachment NJ7A, a detailed description of any options existing or to be created with respect to securities issued by the business entity, which description shall include, but not be limited to, the title and amount of securities subject to option, the year or years during which the options were or will be granted, the conditions under which the options were or will be granted, the consideration for granting the option and the year or years during which, and the terms under which, optionees became or will become, entitled to exercise the options, and when such options expire (or include as Attachment NJ7A copies of any outstanding option plans or proxy statements that provide the requested information). (Note: For the purpose of this application, option shall mean right, warrant or option to subscribe to or purchase any securities issued by the business entity).
- B. Use Attachment NJ7B to provide the following information regarding all persons holding the options described in question NJ7A.

NAME	BENEFICIAL OWNER'S ADDRESS	OPTIONS HELD	MARKET VALUE (AT ISSUANCE)
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NJ8. INSIDER TRANSACTIONS

In Attachment NJ8, provide the following information for each change that occurred within the last five years preceding this application in the beneficial ownership of a business entity on the part of any person who is indirectly or directly a beneficial owner of 10 percent or more of any class of securities or other ownership interest in the business entity or who is or was within that period a director or officer of the business entity. (Include changes resulting from (a) gift; (b) purchase; (c) sale; (d) exercise of an option to purchase; (e) exercise of an option to sell; (f) grant or receipt of a put; or (g) grant or receipt of a call).

DATE OF TRANSACTION	NATURE OF TRANSACTION	PARTIES TO TRANSACTION (INCLUDE POSITIONS)	NAMES OF SECURITIES INVOLVED
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NJ9. PROXY AND INFORMATION STATEMENT

Provide as Attachment NJ9, a copy of the last definitive Proxy or Information Statement filed pursuant to any securities laws.

NJ10. REGISTRATION STATEMENT

Provide as Attachment NJ10, a copy of all Registration Statements filed in the last five years pursuant to any securities laws.

NJ11. REPORTS OF ACCOUNTANTS

Provide as Attachment NJ11, a copy of all reports and correspondence, other than those previously included in this application, submitted in the last five years by independent auditors for the business entity which pertain to the issuance of financial statements, managerial advisory services, or internal control recommendations. Include the name, address and telephone number of the current outside auditor(s).

NJ12. MULTI-JURISDICTIONAL BUSINESS FORM AND NEW JERSEY SUPPLEMENTAL FORM ATTACHMENTS

On the following chart, indicate with a checkmark which attachments are included with this application, consisting of both the Multi-Jurisdictional Business Form and the New Jersey Supplemental Form. If an attachment is not applicable, indicate N/A. The attachment numbers correspond to the question numbers on the Multi-Jurisdictional Business Form and the New Jersey Supplemental Form.

Attachment Number	Attachment Description	√ if attached N/A if not attached
A4	Formation documents and all amendments and proposed amendments	
A6	Company Business Plan	
A8a	Licenses (Government)	
A8b	Licenses (Gaming)	
A9	Corporate Family Tree	
A27	Credit ratings, credit report, analyst's report	
B1	Audited financial statements for the last five years	
B1a	Interim financial statements	
B1b	Unaudited financial statements for the last five years	
B2	Copies of forms filed with the taxing authority in the last five years	
B3	Description of long term debt	
B4	Compensation over \$250,000 USD	
B4a	Compensation between \$150,000 and \$250,000 USD	
B5	Financial institutions	
B6	Securities or other ownership interest held by the business entity	
B9	Holders of long term debt	
B11	Description of all bonus, profit sharing, pension, retirement, deferred compensation, and similar plans	
B11a	Additional information for plans described in B11	
B14	Announcements to any stock exchange	
C9	Annual reports submitted to government agencies for the last ten years	
C9a	Annual reports submitted to shareholders for the last five years	
C9b	A copy of the last quarterly unaudited financial statement	
C9c	Copy(ies) of any interim reports	
C10	Public debt or equity offerings	
NJ1	Addresses from which the business entity conducts business as part of an agreement with a casino hotel	
NJ2	Incorporators or founding persons	
NJ3	Compensation of officers and directors	
NJ4	Nonvoting shareholders	
NJ5	Other indebtedness and security devices	
NJ6	Holders of other indebtedness	
NJ7A	Securities options – description	
NJ7B	Persons holding securities options	
NJ8	Insider transactions	
NJ9	A copy of the last definitive proxy or information statement	
NJ10	A copy of all registration statements for the last five years filed in accordance with any securities laws	
NJ11	Copies of all other reports prepared in the last five years by independent auditors of the business entity	

Affidavits and Signatures

Pursuant to the regulations of the Division of Gaming Enforcement, *N.J.A.C.* 13:69A-7.10 and 7.11, this form must be sworn to or affirmed, signed and dated, before a person legally competent to take an oath or affirmation, who shall himself date the signature of the affiant and indicate the basis of his authority to take oaths and affirmations.

The documents on pages 20 through 23 are to be signed in accordance with these regulations. The documents are:

AFFIDAVIT

RELEASE AUTHORIZATION

CONSENT TO INSPECTIONS, SEARCHES AND SEIZURES

WAIVER OF LIABILITY

The President or any officer of the business entity authorized to affirm may complete the affidavit. The remaining documents are to be signed by the President or Chief Executive Officer.

AFFIDAVIT

STATE OF _____:

SS:

COUNTY OF _____:

I, _____, the _____ of the business entity,
(Name) (Title/Position)

being duly sworn according to law, on my oath, deposes and says that I make this statement on behalf of the business entity, and that the above statements are true and correct to the best of my knowledge and belief, and that this statement is executed with the knowledge that any misrepresentation or failure to reveal information may be deemed sufficient cause for the refusal to issue, or the revocation of, a license. Further, that I am voluntarily submitting this statement and understand that misleading statements may subject me to criminal or other sanctions or punishment.

Name of Business Entity

By: _____
(Signature)

(Title)

(Accountant Preparing Form, if any)

Subscribed and sworn to before me
this _____ day of _____, 20__.

(Notary Public)

(Attorney Preparing Form, if any)

RELEASE AUTHORIZATION

TO: All Courts, Probation Departments, Selective Service Boards, Employers, Educational Institutions, Banks, Financial and other such Institutions and all Governmental Agencies – Federal, State and local, without exception, both foreign and domestic

On behalf of _____,
(Name of Business Entity)

I, _____, have authorized the New Jersey Division of Gaming
(Name of President or Chief Executive Officer)

Enforcement to conduct a full investigation into the background of said business entity.

Therefore, you are hereby authorized to release any and all information pertaining to the said business entity, documentary or otherwise, as requested by any employee, agent or representative of the Division of Gaming Enforcement, provided that he or she certifies to you that said business entity has an application pending before the Division of Gaming Enforcement or Casino Control Commission or that said business entity is presently a licensee or registrant required to be qualified under the provisions of the Casino Control Act.

This authorization shall supersede and countermand any prior request or authorization to the contrary.

A photocopy of this authorization will be considered as effective and valid as the original.

(Date)

(Signature)

Subscribed and sworn to before me

this _____ day of _____, 20__.

(Notary Public)

CONSENT TO INSPECTIONS, SEARCHES AND SEIZURES

On behalf of _____,
(Name of Business Entity)

I, _____, hereby consent to all inspections, searches and seizures
(Name of President or Chief Executive Officer)

and the supplying of handwriting exemplars as authorized by the Casino Control Act and by the rules and regulations of the Division of Gaming Enforcement.

The said business is aware of its right, secured by the Constitution of the United States, and by the Constitution of the State of New Jersey, not to consent to such inspections, searches and seizures and I expressly waive and forego that right on behalf of said business entity.

(Date)

(Signature)

Subscribed and sworn to before me
this _____ day of _____, 20__.

(Notary Public)

WAIVER OF LIABILITY

On behalf of _____,
(Name of Business Entity)

I, _____, hereby waive liability as to the State of New Jersey and
(Name of President or Chief Executive Officer)

its instrumentalities and agents, for any damages resulting to the said business entity from any disclosure or publication in any manner, other than a willfully, unlawful disclosure or publication, of any material or information acquired during the licensing process or during any inquiries, investigations or hearings.

(Date)

(Signature)

Subscribed and sworn to before me
this _____ day of _____, 20__.

(Notary Public)