

FULL DISCLOSURE ASSURANCE

Please read and initial in each place that is indicated as proof that you are aware of your responsibility as an applicant and understand what the Kahnawake Gaming Commission (the "Commission") regards as "full disclosure".

I understand that the Commission may deny my application for a Dealer Permit, or may revoke or suspend any Dealer Permit that has been issued to me, if I fail to fully and accurately fully disclose any and all of my criminal activities, criminal records or criminal associations, required by the Commission's application and related forms.

_____ Initials

More specifically, I affirm that:

- I understand that the phrases "I did not remember", "I forgot" or "I didn't know" (or any variation of these phrases) will not be accepted as excuses for failing to meet the Commission's full disclosure requirements.

_____ Initials

- I understand that the burden of proving my honesty, good character and integrity is mine alone. For this purpose, I will obtain and provide any required documents as requested by the Commission within the specific time given.

_____ Initials

- I understand that it is my responsibility to report to the Commission (or Commission representatives) within seventy two (72) hours, all future charges, arrests, major citations, bench warrants and other police actions or judicial proceedings taken against me, regardless of the outcome and that failure to so report may result in the denial of my application for a Dealer Permit or the revocation or suspension of any Dealer Permit that has been issued to me,

_____ Initials

- I have personally reviewed, completed and signed my application and all other relevant documents. I understand all of the requirements of my application and all other relevant documents and affirm that all of the information that I have provided therein is complete and accurate.

_____ Initials

SIGNED at _____ on the _____ day of _____, 20____,

Applicant's Signature

Witness