SAINT PAUL
SAFETY & INSPECTIONS

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TEMPORARY LAWFUL GAMBLING EVENT LICENSE APPLICATION

LAWFUL GAMBLING CONDUCT AFFIDAVIT BY

ORGANIZATION CEO/PRESIDENT

I have read the State of Minnesota Statutes, State of Minnesota Rules, and City of Saint Paul Ordinances governing illegal gambling and the conduct of temporary lawful gambling events for exempt and excluded organizations.

I, as CEO/President of the below named organization, acknowledge that the organization's officers and agents are responsible parties to the organization's activities and hereby certify that the organization will conduct the lawful gambling event(s) in accordance with applicable State of Minnesota and City of Saint Paul regulations.

Organization Name (please print) _____

Name & Title (please print) _____

Signature _____

Date _____

NOTARY PUBLIC INFORMATION

Notary Public Seal must be current and correct. The seal may not be altered.

Subscribed and sworn to before me this _____

day of _____, _____

(Notary Public Signature)