

# COAM PRE-QUALIFICATION AUCTION PARTICIPATION FORM

GEORGIA LOTTERY CORPORATION • P.O. Box 56927 • Atlanta, GA 30343 • 1-800-746-8546 • OPTION #4 • Retailer Contracts Administration



OWNER/PARTNER/SHAREHOLDER	<b>Instructions:</b> Each owner, partner, and shareholder that will have an interest in the Master License business must complete the Owner/Partner/Shareholder section of the COAM Pre-Qualification Form.					<b>FOR GLC USE ONLY</b>		
						<b>BIDDER NO.:</b>		
	First, Middle & Last Name of Owner or Principal					% of Ownership		
	Business E-mail <input type="checkbox"/> Check Box if this is the Primary E-mail for Communication			Phone Number		Social Security Number		
	Business Address (Street Number, Street Name, Suite Number)							
	City			State		Zip Code		
	Date of Birth		Race	Height	Weight	Hair Color	Eye Color	
	<b>CONSENT AND AUTHORIZATION FOR RELEASE OF PERSONAL BACKGROUND INFORMATION</b>							
	<p>I hereby certify that the information contained on this form or otherwise submitted by me to the Georgia Lottery Corporation ("GLC") in connection with this Pre-Qualification application to become a Bona Fide Coin Operated Amusement Machine (COAM) licensee is true and correct in every respect. I understand, agree and consent that GLC may make any and all investigations of my criminal history record information for qualification of the Applicant as a bidder in any auction for a Master License. I hereby authorize GLC to conduct a criminal background investigation as may be necessary to process my application. I authorize GLC to share any such information, privileged, confidential or otherwise, necessary to consider this application in any and all manners consistent with all applicable laws. A photocopy of this release will be valid as an original thereof, even though said photocopy does not contain an original writing of my signature. This release will expire upon the final termination of the Applicant's participation as a bidder for a Master License. I further understand and acknowledge that providing inaccurate or misleading information is grounds for rejection of this Pre-Qualification application and may subject the Applicant and me to the penalties set forth in the Georgia Lottery for Education Act, O.C.G.A. §50-27-1, et seq.</p>							
	Signature: _____					Date: _____		
NOTARY	State of: _____ County of: _____							
	Sworn to and subscribed before me this _____ (Day) of _____ (Month) _____ (Year)							
	Notary Public Seal and Signature: _____ My Commission Expires: _____							
	Personal identification must be presented to and verified by Notary Public: ID Type: _____ ID No.: _____							
OWNER/PARTNER/SHAREHOLDER	First, Middle & Last Name of Owner or Principal					% of Ownership		
	Business E-mail <input type="checkbox"/> Check Box if this is the Primary E-mail for Communication			Phone Number		Social Security Number		
	Business Address (Street Number, Street Name, Suite Number)							
	City			State		Zip Code		
	Date of Birth		Race	Height	Weight	Hair Color	Eye Color	
	<b>CONSENT AND AUTHORIZATION FOR RELEASE OF PERSONAL BACKGROUND INFORMATION</b>							
	<p>I hereby certify that the information contained on this form or otherwise submitted by me to the Georgia Lottery Corporation ("GLC") in connection with this Pre-Qualification application to become a Bona Fide Coin Operated Amusement Machine (COAM) licensee is true and correct in every respect. I understand, agree and consent that GLC may make any and all investigations of my criminal history record information for qualification of the Applicant as a bidder in any auction for a Master License. I hereby authorize GLC to conduct a criminal background investigation as may be necessary to process my application. I authorize GLC to share any such information, privileged, confidential or otherwise, necessary to consider this application in any and all manners consistent with all applicable laws. A photocopy of this release will be valid as an original thereof, even though said photocopy does not contain an original writing of my signature. This release will expire upon the final termination of the Applicant's participation as a bidder for a Master License. I further understand and acknowledge that providing inaccurate or misleading information is grounds for rejection of this Pre-Qualification application and may subject the Applicant and me to the penalties set forth in the Georgia Lottery for Education Act, O.C.G.A. §50-27-1, et seq.</p>							
	Signature: _____					Date: _____		
	NOTARY	State of: _____ County of: _____						
		Sworn to and subscribed before me this _____ (Day) of _____ (Month) _____ (Year)						
Notary Public Seal and Signature: _____ My Commission Expires: _____								
Personal identification must be presented to and verified by Notary Public: ID Type: _____ ID No.: _____								