

ATTACHMENT B
(OWNER/OFFICERS/AGREEMENT HOLDERS)

Each person will need to complete a separate form

VOLUNTARY CONSENT TO RELEASE INFORMATION, MATERIALS, AND DOCUMENTS

To all Courts, Probation Departments, Selective Service Boards, Employers, and all Government Agencies federal, state, and local, without exception, both foreign and domestic.

I, _____
(FULL LEGAL NAME OF PERSON AUTHORIZED TO EXECUTE THIS RELEASE)

authorized the Michigan Gaming Control Board and its employees and agents to conduct a full background investigation into my personal and business activities.

Therefore, I authorize and request that you release any and all information, materials, and documents in your possession which have been requested by any employee or agent of the Michigan Gaming Control Board regarding my personal or business activities. I am voluntarily giving this consent to release information, materials, and documents provided that the employee or agent of the Michigan Gaming Control Board properly identifies himself or herself as an agent or employee of the Michigan Gaming Control Board.

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

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

Date:

Authorized Agent Signature

Print Name & Title

Before me, the undersigned, a Notary Public in and for said County and State, the above individual personally appeared and acknowledged the execution of the foregoing instrument as his/her voluntary act and deed.

Witness, my hand and Notary Seal, this _____ day of _____ of _____.

Notary Public (Signature)

Notary Public (Printed Name)

My Commission Expires: _____ County of Residence: _____