

State of Michigan Michigan Gaming Control Board
Millionaire Party Licensing
3062 W. Grand Blvd., Suite L-700 Detroit, MI 48202 Phone: (313) 456-4940

Fax: (313) 456-3405 Email: Millionaireparty@michigan.gov www.michigan.gov/mgcb

MILLIONAIRE PARTY OFFICER/CONTACT INFORMATION

Please complete and include the most current officer and contact information and submit to millionaireparty@michigan.gov . If your organization's officers, address and/or mailing address have changed, please submit a completed Qualified Organization Information Change form.						Date
Organization Name				Telephone Number		Organization ID Number
ORGANIZATION OFFICERS: List the name, title, mailing address, telephone NOTE: Please complete all fields for each individualique email may be used only for the same indiv	ıal listed	. Email addresses must be	unique for each in		address (cannot be shared). The same
Principal Officer						
Name	Titl	Title			Telephone Number	
Mailing Address	Cit	City, State, ZIP Code			Email Address	
Vice President or Equivalent	<u> </u>					
Name	Title				Telephone Number	
Mailing Address	Cit	y, State, ZIP Code			Email A	ddress
Other Officer				<u> </u>		
Name	Titl	е			Telepho	ne Number
Mailing Address	City, State, ZIP Code				Email Address	
ORGANIZATION CONTACT: List the name, title, mailing address, physical a NOTE: Please complete all fields for the individua email may be used only for the same individual, e.	l listed.	Email address must be uniq		J		ot be shared). The same unique
Name	Titl	Title		Telephone Number		
Mailing Address	Cit	City, State, ZIP Code		Email		ddress
Physical Address	City	y, State, ZIP Code				
I certify I am the individual responsible for s	ubmitting		uthority to execut	te this form on bel	half of th	e organization.
Printed Name of Person Submitting Form		Title		Date	-	

PLEASE MAKE A COPY OF THE COMPLETED FORM FOR YOUR RECORDS

Authority: Act 382 of the Public Acts of 1972, as amended