## RELEASE AUTHORISATION

| To All Courts, Probation D<br>Banks, Financial and Other Such I<br>local, without exception, both fore | Departments, Selective Service Boards, Emplo<br>Institutions, and all Governmental Agencies -<br>eign and domestic:                                                                        | yers, Educational Institutions, federal, state, provincial and |
|--------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| Ţ                                                                                                      |                                                                                                                                                                                            | , have                                                         |
| 1,                                                                                                     | (PRINT NAME)                                                                                                                                                                               |                                                                |
|                                                                                                        |                                                                                                                                                                                            |                                                                |
|                                                                                                        | ng Commission to conduct a full investigation into                                                                                                                                         |                                                                |
| or otherwise, as requested by any                                                                      | authorized to release any and all information<br>employee or agent of the Casino Gaming Cor<br>o the Casino Gaming Commission's casino ga-<br>ales and regulations of the Casino Gaming Co | aming licensing procedures under                               |
| This authorisation shall supersede and countermand any prior request or authorisation to the contrary. |                                                                                                                                                                                            |                                                                |
| A photostatic copy of this authorisation will be considered as effective and valid as the original.    |                                                                                                                                                                                            |                                                                |
| DATED:                                                                                                 | (Signature of Applicant)                                                                                                                                                                   | (LEGAL SIGNATURE)                                              |
|                                                                                                        |                                                                                                                                                                                            |                                                                |
| Subscribed and sworn to                                                                                |                                                                                                                                                                                            |                                                                |
| before me this                                                                                         | day                                                                                                                                                                                        |                                                                |
| of                                                                                                     | _, 20                                                                                                                                                                                      |                                                                |
| NOTARY PUBLIC                                                                                          |                                                                                                                                                                                            | STATE                                                          |