

## **ADDENDUM "A" – INCORPORATION/ORGANIZATION**

If the business is a corporation, complete the following. (If a partnership or other form of business organization, furnish similar information as shown below):

(a) Place of Incorporation \_\_\_\_\_ Date:

Other states or jurisdictions where incorporated, or filed with state corporations divisions:

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(b) Has this company filed with The Oregon Secretary of State Corporations Division as a corporation or as an assumed business name (dba) conducting business in Oregon? Yes  No

(c) Attach a certified copy of Articles of Incorporation/Partnership Agreement.

A certified copy of the Articles of Incorporation or a copy of the Partnership Agreement is attached. Yes  No

(d) Describe in detail the type of business which this company conducts.

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(e) List the types of goods or services the company intends to provide to the Tribal Gaming Center(s) in Oregon.

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(f) If known, list each person originally involved in the organization of this company by name and current address.

Position:	Name (last/first/middle):	Address:	
City/State/Zip:		SSN:	DOB:
Position:	Name (last/first/middle):	Address:	
City/State/Zip:		SSN:	DOB:
Position:	Name (last/first/middle):	Address:	
City/State/Zip:		SSN:	DOB:

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Position:	Name (last/first/middle):	Address:	
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Position:	Name (last/first/middle):	Address:	
City/State/Zip:		SSN:	DOB:
Position:	Name (last/first/middle):	Address:	
City/State/Zip:		SSN:	DOB:
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City/State/Zip:		SSN:	DOB:
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City/State/Zip:		SSN:	DOB:

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