

OREGON STATE ATHLETIC COMMISSION

Personal Disclosure Form



PERSONAL DISCLOSURE GENERAL INSTRUCTIONS

Hand-print or type an answer to every question. If a question does not apply to you, state N/A. **If space available is insufficient, continue on a separate sheet and precede each answer with the appropriate title (and number).** Do not misstate or omit any material fact(s) as each statement made herein is subject to verification. Applicant must initial each page as provided in lower, right-hand corner. By placing his/her initials on each page, the applicant is attesting to the accuracy and completeness of the information contained on that page.

All applicants are advised that this personal history record is an official document and misrepresentation or failure to reveal information requested may be deemed to be sufficient cause for the refusal or revocation of a license with the Oregon State Athletic Commission.

**AFFIX A PHOTOGRAPH OF APPLICANT HERE
THAT WAS TAKEN WITHIN THE PAST YEAR**

SECTION 1 PERSONAL INFORMATION

APPLICANT

Legal Name:
Last First Middle

Aliases (nicknames, maiden, other name changes, legal or otherwise)

Date of Birth: Place of Birth (City, County, State, Country):

Social Security #: Driver's License #: State:

Residence Address: Occupation/Title:

City: State: Zip Code:

Employer: Employer's Address:

City: State: Zip Code:

Email Address: Phone Number:

Age: Height: Weight:

Hair Color: Eye Color: Complexion:

SECTION 2 LEGAL PROCEEDINGS

1. Have you ever been arrested, charged, indicted, or summoned to answer for any criminal offense, traffic crime, or violation for any reason whatsoever, regardless of the disposition of the event? (Except MINOR traffic citations.)

Yes No

If "Yes," give details in space provided below. List all cases without exception, in any state.

Crime/Offense	Incident Date	Location (City, State, Country)	Disposition

2. Has a criminal indictment, information, or complaint ever been returned against you, but for which you were not arrested or in which you were named as an unindicted co-party or co-conspirator?

Yes No

3. Have you ever received a pardon for any criminal offense?

Yes No

If "Yes," when?

City, County, State

4. Have you been a suspect or possible suspect in any crime?

Yes No

5. Have you been convicted of a crime and...

a. Had the conviction "purged" from your record?

Yes No

b. Been given a "deferred sentence?"

Yes No

c. Been given a "diversion?"

Yes No

6. Have you been the subject of a Grand Jury Investigation?

Yes No

7. Have you as an individual, member of a partnership, or owner, director, or officer of a corporation, ever been a party to a lawsuit as either a plaintiff or defendant (other than divorces)?

Yes No

8. Have you ever been involved in any bankruptcy proceeding in any jurisdiction?

Yes No

9. Is there a tax lien on your income or assets?

Yes No

10. Have you ever been delinquent on any Federal, State or Parish/County Income Taxes owed?

Yes No

11. Have you ever been denied, or ever had revoked a promoter's or fighter's license of any kind in any state or jurisdiction?

Yes No

Sole Proprietorships, and Partnerships must complete Section 3

SECTION 3 CHILD SUPPORT INFORMATION

When a license is issued, in the State of Oregon, the issuing entities are required to send license information to the Oregon Department of Justice Child Support Program. If you owe past-due child support the Child Support Program will contact you, and it is possible your license could be suspended if payment arrangements are not made per Oregon Revised Statute 25.750 – 25.785

Please mark ONE appropriate response (failure to mark one of the three will result in denial of the application)

I am not subject to a court order for the support of a child

I am subject to a court order for the support of one or more children and am in compliance with the order or am

in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order; or

I am subject to a court order for the support of one or more children and am not in compliance with the order or

a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

I declare under penalty of perjury under the law of the State of Oregon that I have read the foregoing application for a License, that all answers given are my own, that all answers are true of my own knowledge. Further, I understand and agree that any misstatement of material fact in this application will constitute grounds for revocation of this license.

APPLICANT'S SIGNATURE:

Date:

FINANCIAL RECORDS DISCLOSURE AUTHORIZATION

TO ANY FINANCIAL INSTITUTION:

I authorize and direct you to disclose any and all records and to deliver true copies thereof concerning or pertaining in any way to me or to the undersigned business to any law enforcement officer of the Oregon State Police, Gaming Enforcement Division. Disclosure is authorized for any civil, administrative, or criminal action which may be undertaken by the State of Oregon against me or any other person or business. Further, I authorize and direct you to honor a true copy of the original of this authorization as if the copy were the original itself.

NOTICE TO APPLICANT:

I understand that pursuant to ORS 192.560(2)(d), I may revoke this authorization at any time in writing. Any such revocation shall be sent to the Oregon State Athletic Commission 4190 Aumsville Highway SE Salem, Oregon 97317, by certified mail, return receipt requested. That I hereby attest that the information provided is true, accurate, and complete to the best of my knowledge.

Date:

EXECUTED this day of

Applicant's Signature:

Print Name

Applicant's Title

Subscribed and Sworn to before me

this Date:
day of
at (city, state)

(SEAL)

Notary Public (Signature)

Print Name:

My Commission Expires:

AUTHORITY TO RELEASE CREDIT, CHARACTER, AND VENDOR HISTORY INFORMATION

Having made application through the Oregon State Athletic Commission, I hereby authorize a complete investigation of the applicant, including applicant history, credit record, civil litigation, business records, corporate records history, corporate filings, banking records, and criminal arrest and indictments, by the Oregon State Police, or another police agency authorized to conduct applicant investigations to ascertain any and all information which may concern vendor credit, character, or history, whether same is of record or not, and release your organization and all persons whomsoever from any charge because of furnishing said information. I authorize a true copy of the original of this authorization as if the copy were the original itself.

NOTICE TO APPLICANT:

I understand that pursuant to ORS 192.560(2)(d), I may revoke this authorization at any time in writing. Any such revocation shall be sent to the Oregon State Athletic Commission 4190 Aumsville Highway SE Salem, Oregon 97317, by certified mail, return receipt requested. That I hereby attest that the information provided is true, accurate, and complete to the best of my knowledge.

Business Name (Please Print)

Name (Company President/CEO, Corporate Officer)

Signature:

Date:

Telephone:

Subscribed and Sworn to before me

this

Date:

day of

at (city,
state)

(SEAL)

Notary Public (Signature)

Print Name:

My Commission
Expires:

SWORN STATEMENT AND DEPOSITION

State of

County of

I, , being duly sworn, depose and say that I have read the above and attached statements, documents, information, and they are true and correct to the best of my knowledge and belief. Further, this statement is executed with the knowledge that misrepresentation or failure to disclose made in the above disclosure may be deemed sufficient cause for the denial of a promoter license by the Oregon State Athletic Commission. Further, that I am aware that later discovery of an omission or misrepresentation made in the above statements, documents, information, may be grounds for denial of a promoter license. Further, that I am voluntarily submitting this disclosure under oath with the full knowledge that Oregon Revised Statute 162.075, False Swearing, provides that, "(1) A person commits the crime of false swearing if the person makes a false sworn statement, knowing it to be false, and (2) False Swearing is a Class A Misdemeanor."

Company President/CEO Signature:

Printed Name Title

I, , do hereby certify that I have prepared this document on behalf of the vendor/company/applicant. That I hereby attest that the information provided is true, accurate, and complete to the best of my knowledge.

Signature:

Printed Name Title

Business Address: Phone #

Subscribed and Sworn to before me

this Date:

day of

at (city, state)

(SEAL)

Notary Public (Signature)

Print Name:

My Commission Expires:

ADDITIONAL INFORMATION

(Add additional sheets as necessary)