

**CG-CO, CURRENT OFFICERS**

State Form 49873 (R5 / 11-12)

INDIANA GAMING COMMISSION

| | | | | |
|--|--|-------------------------------------|----------------------------------|--|
| Organization name (<i>please type or print</i>) | | Email address | | |
| Address of Principal Office (<i>number and street</i>) | | Federal Identification number (FID) | | |
| City | State | ZIP code | County | |
| Organization telephone number | | Organization fax number | | |
| Full legal name of Officer | Home Address (<i>number and street, city, state, ZIP code, and county</i>) | Home Telephone Number | Title | Term Expires (<i>month, day, year</i>) |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| <hr/> | | | | |
| Signature of Presiding Officer | Print name | Title | Daytime telephone number | Date (<i>month, day, year</i>) |
| Signature of Secretary | Print name | Daytime telephone number | Date (<i>month, day, year</i>) | |