## INSTRUCTIONS

Fee of \$750, to be remitted by check, postal or money order. DO NOT SEND CURRENCY

## STATE ATHLETIC COMMISSION OF NEVADA

## RENEWAL APPLICATION FOR PROMOTER LICENSE

FOR OFFICIAL USE ONLY			
License No.			
Cash M.O. Check			
Number			
Receipt Number			

FEE: \$750

	Date:			
TO: THE STATE ATHLETIC COMMI The undersigned, having paid the fee license as a PROMOTER for the cale	e of seven hundred fifty	y dollars (\$750) as required by law,	hereby makes application for a	
(Please Print)				
Company Name:				
Mailing Address:			Apartment #:	
City:				
Telephone (including area code):		Fax:		
E-mail Address:				
Contact Person:				
Matchmaker:	E-Mail:			
		RS OR PARTNERS		
Donaidant	List name and add	dress of all officers or partners		
Vice - President:				
Treasurer:		unda Canatami af Otata O		
Do you have a Nevada Business Lice			<del>_</del>	
If "Yes", what is the number:				
Will your bonds be in effect for the er	itire calendar year for v	which you are requesting a license?	Yes ∐No	
Are there any other changes in your caware of in the following areas?  1. Financial 2. Business - Organization, S 3. Legal - Personal and Busin Or any other areas that change have (Attach additional sheets if necessary	Structure, etc. ness occurred that the Athl			
I hereby declare, under penalty of perj answers to the questions have been c knowledge, that this license expires of of a material fact on this application sl	ompleted by me and the n December 31 of the ye	at all the answers given are my own, ear issued. Further, I understand and	that all the answers are true of my	

Officer and Title