



New Mexico Gaming Control Board  
**BUSINESS REGISTRATION FORM**  
 (Associated with BINGO & RAFFLE ACT)

<b>REGISTRATION TYPE</b>		
Check appropriate box		
<input type="checkbox"/> Distributor	<input type="checkbox"/> Commercial Lessor	<input type="checkbox"/> Manufacturer

Business Name			Control Number (Assigned by Gaming Control Board)		
Doing Business As (DBA) & Trade Names			E-mail Address		
Street Address of Gaming Business				Business Phone Number (      )	
City	State	Zip	Business FAX Number (      )		
Mailing Address, if different from Street Address (city, state, zip)					
Primary Contact Person for Business			Title		Primary Contact Phone Number (      )
Primary Contact Address (city, state, zip)				Primary Contact FAX Number (      )	
<b>Type of Business Structure</b> <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Liability Co <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Publicly Traded Corp <input type="checkbox"/> Trust <input type="checkbox"/> Other					
Federal Tax ID #		State Tax ID /CRS#		PRC #	
State of incorporation or creation of business entity				Date	
Date of qualification to conduct business in New Mexico (IF CORPORATION, PROVIDE CERTIFICATE OF AUTHORITY OR EQUIVALENT FROM NM STATE CORP COMMISSION)					
If a corporation, list all states where corporation is authorized to conduct business					
List all names used by the business entity (other than above)					
List States business is licensed to operate					
<b>Provide following on separate sheet:</b> -Type of service/product business supplies to licensed Bingo entity (Commercial Lessors please also include bookkeeping, security, janitorial services, foods services, etc.) -All contracts with licensees, suppliers, and services (including service contacts)					
Registor's Signature				Date	