



Pima County Clerk of the Board

Robin Brigode

Mary Jo Furphy
Deputy Clerk

Administration Division
130 W. Congress, 5th Floor
Tucson, AZ 85701
Phone: (520) 724-8449 • Fax: (520) 222-0448

Document and Micrographics Mgt. Division
1640 East Benson Highway
Tucson, Arizona 85714
Phone: (520) 351-8454 • Fax: (520) 791-6666

October 21, 2014

Kevin McLindsay
10195 S. Houghton Road
Tucson, AZ 85747

RE: Bingo License Application of Kevin McLindsay
Class A - Small Game, County No.: 14-08-8030

Dear Sir/Madam:

Notice is hereby given that the Pima County Board of Supervisors will hold a hearing in reference to the above captioned bingo license application. This hearing has been scheduled for Tuesday, November 18, 2014, at 9:00 a.m. or thereafter, located at the following location:

Pima County Administration Building
Board of Supervisors Hearing Room
130 W. Congress, 1st Floor
Tucson, AZ 85701

For your information, enclosed is a copy of the Sheriff's Report. Any questions pertaining to the enclosed report should be directed to the Pima County Sheriff's Department at (520) 351-6999. If you have any questions pertaining to the above referenced hearing, please contact this office at 724-8449.

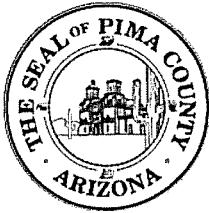
Sincerely,

A handwritten signature in black ink that reads "Robin Brigode".

Robin Brigode
Clerk of the Board

Enclosure

c: Pima County Sheriff Investigative Support Unit



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TO: Pima County Sheriff's Department
Investigative Support Unit

FROM: Bernadette Russell *BR*
Administrative Support Specialist

DATE: September 30, 2014

RE: Sheriff's Report - Bingo License No. 14-08-8030

Attached is a copy of the application of James E. Davis for a Class A - Small Game Bingo License.

Is there any reason why the Board should not recommend approval of the application to the State Tax Commission?

Please return this form as soon as possible, stating your reasons if disapproval is recommended.

SHERIFF'S REPORT

DATE: 10/13/14

Nothing Notes

Investigative Support Unit Supervisor

OCT 17 1967 PC CLK (OF BII) Bk



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TO: Pima County Sheriff's Department
Investigative Support Unit

FROM: Bernadette Russell *BR*
Administrative Support Specialist

DATE: September 30, 2014

RE: Sheriff's Report - Bingo License No. 14-08-8030

Attached is a copy of the application of Dianne L. Davis for a Class A - Small Game Bingo License.

Is there any reason why the Board should not recommend approval of the application to the State Tax Commission?

Please return this form as soon as possible, stating your reasons if disapproval is recommended.

SHERIFF'S REPORT

DATE: 10/13/14

NOTHING NOTED

Investigative Support Unit Supervisor

OCT 17 1968 11:57 PC CLK OF HN 62

- Type or print in black ink and complete all information requested on this form. If you do not, your application will be returned. All information is subject to verification. If you need more space, attach additional sheets.
- **All bingo licenses expire one year from the date of issue.** To continue conducting bingo games, you must renew your license prior to the expiration date.

1 Applicant's Name	Kevin McLindsey		
2a Mailing Address	10195 S. Houghton rd	AZ	85747
2b City	Tucson		
3a Administrative Office Location	11 Same as above		
3b City			
4a Name of Contact Person	4b Telephone		
4c E-mail Address	4c Fax No.		

Falsification of information contained in this application constitutes a Class 6 felony.

REVENUE USE ONLY. DO NOT MARK THIS AREA		2014
88	00292269 0070 PSTR 003	SPAUL
	0095 Bingo Payments	16 001 A
14C0224131001		
License Payment		\$10.00
OK		\$10.00
81 PM CHANGE	RCVD	\$0.00
082214	082514	082514

5 Class B and Class C license applicants only: If applying as a qualified organization, *check one box to indicate the type of organization:*

Charitable Social Religious Veterans
 Fraternal Volunteer Fire Department Homeowners Association Nonprofit Ambulance Service

6 Class B and Class C license applicants only applying as a qualified organization, *provide parent or auxiliary information:*

6a Parent Name	6b Auxiliary Name
Address – Number and Street, Rural Rt., Apt. No.	Address – Number and Street, Rural Rt., Apt. No.
City	State ZIP Code

8 Class B and Class C license applicants only applying as a qualified organization, *list the current officers of the organization:*

Continued on page 2 ➤

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.

<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	<input type="checkbox"/> Class A License	<input type="checkbox"/> Class B License	<input type="checkbox"/> Class C License
Reviewer's Name (please print)	Date	License Number TBD	Effective Date	Expiration Date

9 **Class B and Class C license applicants only:** Bingo checking account information:

Checking Account Number	Bank Name	Bank Branch
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10 **Class B and Class C license applicants only:** Bingo interest-bearing account information:

Account Number	Bank Name	Bank Branch
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11 **Class B and Class C license applicants only:** List all **officers and/or supervisors** authorized to sign checks from the accounts listed above. If applying as a qualified organization, all **supervisors must be members** of the applicant:

11a Name	11b Name
Title	Title
Address – Number and Street, Rural Rt., Apt. No.	
City State ZIP Code	City State ZIP Code

12 List the name(s) of the **one or two** persons who will serve as managers. If applying as a qualified organization, these persons **must be members** of the applicant. *Each person must submit an affidavit.*

12a Name	12b Name
Kevin McLindsay	
Title	Title
Address – Number and Street, Rural Rt., Apt. No.	
City State ZIP Code	City State ZIP Code

13 List the name of the **one** person designated as proceeds coordinator. If applying as a qualified organization, this person **must be an officer or director and a member** of the applicant. *Each person must submit an affidavit.*

Name	Address – Number and Street, Rural Rt., Apt. No.		
Diane Davis	10195 S. Houghton Rd		
Title	City	State	ZIP Code
Activities Director	Tucson	AZ	85747

14 List the name(s) of the person(s) who will serve as supervisor. If applying as a qualified organization, each person **must be a member** of the applicant. *Each person must submit an affidavit.*

14a Name	14b Name
James Davis	
Title	Title
Address – Number and Street, Rural Rt., Apt. No.	
10195 S. Houghton Rd	Address – Number and Street, Rural Rt., Apt. No.
City State ZIP Code	City State ZIP Code
Tucson AZ 85747	
14c Name	14d Name
Deborah Davis	
Title	Title
Address – Number and Street, Rural Rt., Apt. No.	
Address – Number and Street, Rural Rt., Apt. No.	
City State ZIP Code	City State ZIP Code

15 List the name(s) of the person(s) who will serve as assistants. If applying as a qualified organization, each person **must be a member or new member** of the applicant. Except for "Class A" licensees, each person must submit an affidavit.

15a Name <i>Dianne Davis</i>	15b Name
15c Name <i>James Davis</i>	15d Name
15e Name	15f Name
15g Name	15h Name

16 Street address of the physical location where bingo will be played:

10195 S. Houghton Rd Tucson AZ 85747

17 Indicate the time on each respective day that bingo will be played:

SUN	MON	TUE	WED	THUR	FRI	SAT
<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input checked="" type="checkbox"/> 7-9 pm <input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.			

18 List dates of proposed game cancellation if any:

NA

19 Indicate the type of premises where bingo will be played. Check one box:

a Neither rent nor mortgage will be paid from bingo funds.

b Rented or leased. *Attach rental affidavit and copy of rental agreement.*

Landlord's Name	Address – Number and Street, Rural Rt., Apt. No.		
Telephone Number (with area code)	City	State	ZIP Code

c Owned solely by the organization. *Attach copy of mortgage, deed of trust, purchase agreement, escrow agreement, or other related document.*

Holder of Mortgage	Address – Number and Street, Rural Rt., Apt. No.		
Telephone Number (with area code)	City	State	ZIP Code

d Owned jointly with other organization. *Attach copy of mortgage, deed of trust, purchase agreement, escrow agreement, or other related document.*

1) Holder of Mortgage	Address – Number and Street, Rural Rt., Apt. No.		
Telephone Number (with area code)	City	State	ZIP Code
2) Co-Owner Holder:	Address – Number and Street, Rural Rt., Apt. No.		
Telephone Number (with area code)	City	State	ZIP Code
3) Co-Owner Holder:	Address – Number and Street, Rural Rt., Apt. No.		
Telephone Number (with area code)	City	State	ZIP Code

Continued on page 4 ➔

20 List bingo licensees who are or will be conducting bingo in the same premises as you and those licensees located within 1,000 feet of your premises:

20a Name	20b Name		
Address – Number and Street, Rural Rt., Apt. No.	Address – Number and Street, Rural Rt., Apt. No.		
City	State	ZIP Code	City
			State
			ZIP Code

21 Expected bingo expenses:

a Mortgage: \$_____ per month

Payable to	Address – Number and Street, Rural Rt., Apt. No.		
Telephone number (with area code)	City	State	ZIP Code

b Rent: \$_____ per month hour occasion

Payable to	Address – Number and Street, Rural Rt., Apt. No.		
Telephone number (with area code)	City	State	ZIP Code

c Janitorial Services: \$_____ per month hour occasion

Payable to	Address – Number and Street, Rural Rt., Apt. No.		
Telephone number (with area code)	City	State	ZIP Code

d Accounting Services: \$_____ per month hour occasion

Payable to	Address – Number and Street, Rural Rt., Apt. No.		
Telephone number (with area code)	City	State	ZIP Code

e Security Services: \$_____ per month hour occasion

Payable to	Address – Number and Street, Rural Rt., Apt. No.		
Telephone number (with area code)	City	State	ZIP Code

f Bingo Supplies: \$_____ per _____

Payable to	Address – Number and Street, Rural Rt., Apt. No.		
Telephone number (with area code)	City	State	ZIP Code

Line 21 continues on page 5 ➔

21 Expected Bingo Expenses, continued...

g Maximum prize payout per occasion: \$_____. Attach game schedule that lists individual prize amounts.

Paid to	Address – Number and Street, Rural Rt., Apt. No.		
Telephone number (with area code)	City	State	ZIP Code

h Utility Expenses:

Electric (payable to)	Address – Number and Street, Rural Rt., Apt. No.		
Account Number	Monthly Amount	City	State ZIP Code
	\$		

Gas (payable to)	Address – Number and Street, Rural Rt., Apt. No.		
Account Number	Monthly Amount	City	State ZIP Code
	\$		

Water (payable to)	Address – Number and Street, Rural Rt., Apt. No.		
Account Number	Monthly Amount	City	State ZIP Code
	\$		

Trash Removal (payable to)	Address – Number and Street, Rural Rt., Apt. No.		
Account Number	Monthly Amount	City	State ZIP Code
	\$		

22 Briefly state the specific projected use of net proceeds from games of bingo:

To be given to winner.

I, Rein McIndsey, under penalty of perjury and upon oath, declare that I am duly authorized to sign and file this application. I hereby swear or confirm that I have read the foregoing application and know the contents thereof and that all information provided has been fully, accurately, and truthfully completed to the best of my knowledge.

Rein McIndsey
APPLICANT'S SIGNATURE

7-8-14
DATE

Manager
TITLE

Please mail to: Arizona Department of Revenue, PO Box 29019, Phoenix, AZ 85038-9019

 (602) 716-7801