



## AFFIDAVIT OF CONFORMATION LOUISIANA-OWNED BUSINESS

State of \_\_\_\_\_ Parish/County of \_\_\_\_\_

I, \_\_\_\_\_, the Owner of the Company named \_\_\_\_\_,  
(Owner Name) (Company Name)

Located at \_\_\_\_\_,  
(Business Address) (City)

City of the State of \_\_\_\_\_, Zip Code \_\_\_\_\_.  
(State) (Zip)

Submit this affidavit to the Isle of Capri Casino & Hotel at the property selected on the front of the registration form. I do hereby make the following statements and declare that, on my own personal knowledge, they are true.

1) The company \_\_\_\_\_ is licensed and operates in the State (s) of \_\_\_\_\_.  
(Company Name) (State)

2) The company \_\_\_\_\_ is a \_\_\_\_\_ company.  
(Company Name) (Louisiana-Owned)

3) I do understand that a Louisiana Business, Louisiana Company, Louisiana Corporation-A business, company, or corporation which is at least fifty-one (51%) percent owned by one or more individuals domiciled in Louisiana who also control and operate the business. "Control" in this context means exercising the power to make policy decisions. "Operate" in this context means being actively involved in the day-to-day management of the business.

### SWORN TO AND SUBSCRIBED BEFORE ME,

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.  
(Day) (Month) (Year)

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
SIGNATURE OF OWNER

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
NOTARY PUBLIC