

OHIO CASINO CONTROL COMMISSION

John R. Kasich
Governor



June E. Taylor
Chair

DUTY TO UPDATE INFORMATION

Current Name on License (Name that is currently on file with the OCCC):

Date of Birth:

Last 4 of SSN:

CGE Number:

What are you updating?

- Change of Name** – Must provide supporting documentation (e.g., marriage certificate, divorce decree, court order, etc.)
- Change of Contact Information** (e.g., address, phone number, email address, etc.)
- Employment Termination**
- Legal, Financial, Civil, Criminal, or Gaming-Related Information**
- Other**

You are required to sign and date the bottom of the second page.

Change of Name

What are you changing your name to?

Change of Contact Information

Updated Home Address (Number and Street, Apt #, City, State, Zip code):

Updated Mailing Address (If this is the same as your home address, please write "Same"):

Home Telephone Number:

Cellular/Alternative Telephone Number:

Email:

Employment Termination

Describe the reason and circumstances surrounding your termination. Attach any supporting documentation.

Financial or Civil Matter

Describe the financial or civil matter, including: date filed, jurisdiction, case/docket number, other parties involved, nature of the matter, and disposition and date of disposition (if applicable). Attach any supporting documentation.

Criminal or Gaming-Related Matter

Describe the offense or gaming-related matter, including: the date, the agency or jurisdiction involved (include address), nature of the offense or allegation, and disposition and date of disposition (if applicable). Attach any supporting documentation.

Other

Provide a detailed description of the update (e.g., date, time, location, incident/issue narrative, etc.). Attach any supporting documentation.

Signature

Date