GAMING ORGANIZATION E-MAIL CONTACT

NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
LICENSING SECTION
SFN 54481 (10-2016)

Gaming License Number

G - _____

This form should be used to update or change information regarding a contact person and e-mail address on file for an organization who has a state gaming license.

☐ New Contact ☐ Replacing previous contact ☐ Additional contact

Official, Legal Name of Gaming Organization: _____

E-mail Address: _____

Contact Person: _____

Official Title: _____

Contact Person's Daytime Telephone Number: _____

By signing and submitting this form, the contact person agrees to receive information from the Office of Attorney General at the above e-mail address.

_____ _____

Signature Date

RETURN FORM TO:

Email to: agolicensing@nd.gov
Fax to: (701) 328-3535

Questions contact Licensing Section:
(701) 328-2329