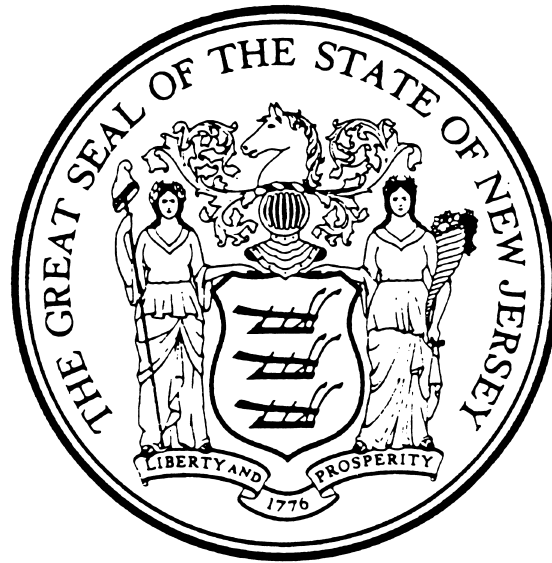


STATE OF NEW JERSEY
Division of Gaming Enforcement



LABOR ORGANIZATION REGISTRATION STATEMENT

Labor Organization Registration Statement

I. REGISTRATION REQUIREMENT:

- A. Pursuant to *N.J.S.A. 5:12-93*, every labor organization that represents or seeks to represent employees who are employed in a casino hotel, casino, or a casino simulcasting facility by a casino licensee, is required to biennially register with the Division of Gaming Enforcement (Division) and provide such information to the Division as the Division may require.
- B. Every affiliate of a labor organization that is required to register with the Division must also register, unless the Division has exempted the affiliate from the registration requirement.
- C. Failure of either the labor organization or its affiliates to biennially register, if required to do so, will result in the issuance of an order prohibiting the labor organization and its affiliates from receiving any dues from or on behalf of such employees and from administering any pension or welfare funds from or on behalf of such employees.

II. REGISTRATION EXEMPTION:

- A. The Division may exempt any labor organization that would otherwise be required to register, only because it is affiliated with another labor organization that is required to register with the Division. Such exemption may be granted where the Division finds that the affiliate:
 - 1. is not, and is not seeking to be, the certified bargaining representative of any employee(s) who are employed in a casino hotel, casino, or a casino simulcasting facility by a casino licensee; and
 - 2. is not involved, or seeking to be involved actively, directly or substantially, in the control or direction of the representation of any such employees.
- B. The Division may grant an exemption to any affiliate based upon information provided by the registered labor organization with which the affiliate is affiliated. However, the Division reserves the right to withdraw an exemption from an affiliate if the Division receives information indicating that the exemption is not justified.

III. WHO MUST FILE:

- A. Every labor organization that is required under Section 93 of the Casino Control Act to register with the Division, and every affiliate that is not exempted by the Division, must biennially file this statement in the proper manner. If there is any question as to whether your labor organization must file, inquiries may be made by writing the Division at:

New Jersey Division of Gaming Enforcement
Service Industry Licensing Bureau (SILB), Intake Unit
1325 Boardwalk
Atlantic City, NJ 08401
Attn.: Labor Organization

IV. DEFINITIONS:

- A. The Division has defined several relevant terms in its regulations. *N.J.A.C. 13:69A-12.1*. These terms are used in this form and are defined on Page 1 of the Labor Organization Individual Disclosure Form. All persons involved in the preparation and signing of this registration statement should be familiar with these definitions to assure that complete and accurate responses are provided. If there is any question concerning the meaning or application of these terms, inquiries also may be made by writing to the Division at the above address.

V. CONTINUING DUTY TO DISCLOSE:

- A. Failure to provide all the information required by this registration statement, or any other information required by the Division, may result in the rejection of the registration statement or the revocation of the labor organization's registration.

VI. INSTRUCTIONS FOR COMPLETING THE REGISTRATION STATEMENT:

- A. Read each question carefully prior to answering. Answer every question completely. If the question does not apply to the labor organization, indicate "Does Not Apply" in response to that question. If there is nothing to disclose in response to a particular question, write "None" in response to that question. Do not skip or omit any item from the statement. All entries on this registration statement, except for initials and signatures, must be typed or printed in block lettering using only dark ink. If the registration statement is not legible, it will not be accepted.
- B. Initial each page of the statement after completion in the space provided. If you need additional space to answer any question(s), use the blank page provided on page 9 of this statement. If you use this additional space, be sure to indicate the number(s) of the question(s) that you are answering. For this statement to be complete, the Affidavit, Release Authorization and Notice must be properly signed and notarized as required.

- C. Any modification of the questions or the pre-printed information asked for in this registration statement, will result in the rejection of the registration statement. The original and one copy of the registration statement and individual disclosure forms, including necessary documents and exhibits, must be forwarded to the Division at the address on page 2, together with a check for \$250, made payable to the CASINO CONTROL FUND. *N.J.A.C. 13:69A-9.10.*

VII. FEDERAL REPORTS:

- A. If any item on this form requests information that is contained in a report that was filed by any labor organization, or its affiliates, with the United States Secretary of Labor under the Labor Management Reporting and Disclosure Act (LMRDA) or the Employees Retirement Income Security Act (ERISA), then that report, or the relevant portion of that report, may be furnished to the Division in place of the requested information. Please note that this report must be attached to the back of the registration statement with an exhibit number. In the statement itself, under the appropriate item, there must be a reference to the attached report. For example, "See Schedule 9, Form LM-2, attached hereto as pages 2a through 5a." If the federal report does not contain all the information requested by the question, or if the federal report is no longer completely accurate, the filing labor organization must supply the additional or corrective information. The use of a federal report does not excuse the labor organization from the obligation to provide complete and accurate information.

VIII. AFFIDAVITS AND SIGNATURES:

- A. Pursuant to the regulations of the Division, *N.J.A.C. 13:69A-7.10*, the Affidavit on page 10 must be sworn to or affirmed, signed and dated before a person legally competent to take an oath or affirmation who shall himself date the signature of the Affidavit and indicate the basis of his authority to take oaths and affirmations.
- B. The president of the labor organization, or any officer authorized to affirm on behalf of the labor organization, must complete this Affidavit attesting to the truth of the information on this form.

IX. RELEASE AUTHORIZATION AND NOTICE:

- A. Pursuant to *N.J.A.C. 13:69A-7.4* and *7.6*, each labor organization must have the "Release Authorization" on page 11 properly signed, dated and notarized by the president or any officer so authorized to execute such a document, and bind the labor organization. The attached "Notice" on page 12 must also be acknowledged by a proper signature and date, as required by *N.J.A.C. 13:69A-7.5*.

LABOR ORGANIZATION REGISTRATION FORM-

1. NAME OF THE LABOR ORGANIZATION:

FULL NAME OF THE LABOR ORGANIZATION (as it appears on its charter, constitution, or other official document) (DO NOT ABBREVIATE)

2. CURRENT AND FORMER ADDRESS OF THE LABOR ORGANIZATION:

CURRENT ADDRESS Number/Street City State Zip Code COUNTRY

MAILING ADDRESS, if different (P.O. Box, City, State, Zip Code, Country)

FORMER ADDRESS Number/Street City State Zip Code COUNTRY

WEBSITE (URL)

3. PERSON TO BE CONTACTED IN REFERENCE TO THESE FORMS:

Name and Title

COUNTRY TELEPHONE Area Code Number

Cell Number with Area Code E-Mail Address Fax Number (if available)

Check the appropriate box:

- This is an initial registration statement.
- This is a biennial renewal registration statement.
- If this is a biennial renewal registration statement, indicate the date on which the current registration expires:

FOR STATE OF NEW JERSEY USE ONLY		
LOG #	FILED DATE	FOR RENEWALS-TIME PERIOD

4. **AFFILIATES**

A. State the names of all the affiliates of the labor organization that are either a parent body or a superior organization, with any right or ability to control, supervise, discipline, or set policy for this labor organization:

B. State the names of all the affiliates of the labor organization that are chartered by the same parent body as this labor organization. However, if there are more than 10 such affiliates, they may be generally designated or described in terms of the parent body:

C. State the names of all the affiliates of the labor organization that are governed by the same constitution or bylaws. However, if there are more than 10 such affiliates, they may be generally designated or described:

5. REPRESENTATION OR CONTROL

A. State the name of any affiliate of the labor organization that is involved or seeking to be involved actively, directly or substantially, in the control or direction of the representation of any employees who are employed in a casino hotel, casino, or a casino simulcasting facility by a casino licensee:

B. Describe the nature of the actual or probable involvement of each affiliate named in A.:

C. If the answers to A. and B. above are "None," check the box below to indicate the following statement is true:

"No affiliate of this labor organization is involved or seeking to be involved actively, directly or substantially, in the control or direction of the representation of any employees who are employed in a casino hotel, casino, or a casino simulcasting facility by a casino licensee."

6. FINANCIAL INTEREST IN CASINO HOTEL OR CASINO LICENSEE

A. Does the labor organization or any pension or welfare system maintained by the organization hold any financial interest whatsoever in any casino hotel or casino licensee whose employees the organization, or its affiliates, represent or seek to represent?

Yes No

B. If the answer to A. is Yes, provide the following information:

NATURE OF INTEREST (Stocks, Bonds, Loans, etc.)	AMOUNT AND TERMS (Value, Shares, Interest, etc.)	NAME OF INTEREST AND HOLDER OF RECORD (if other than the organization)	CASINO HOTEL/ LICENSEE OF INTEREST

7. **PENSION/WELFARE SYSTEM**

A. State the full names and mailing addresses of all pensions or welfare systems maintained by the labor organization:

B. List the name, address, title or position, date of birth, and general authority and responsibilities of each officer and agent of a pension or welfare system maintained by the labor organization:

NAME OF SYSTEM	OFFICER/AGENT'S NAME	TITLE OR POSITION	DATE OF BIRTH	AUTHORITY/RESPONSIBILITY

8. **OFFICERS OF THE LABOR ORGANIZATION**

A. List the name, address, title or position, date of birth, and responsibilities of each officer and officer-elect of the labor organization. An officer is any constitutional officer, any person authorized to perform the functions of president, vice president, secretary/treasurer, or other executive functions of a labor organization, or any member of its executive board or similar governing body.

Note: If this is not a national or international labor organization, each officer of the organization must file a Labor Organization Individual Disclosure Form. If this is a national or international labor organization, every officer who exercises any authority, discretion or influence over the operation of the labor organization, with regard to any employment matter relating to employees who are employed in a casino hotel, casino or a casino simulcasting facility by a casino licensee, must file a Labor Organization Individual Disclosure Form.

NAME	ADDRESS	TITLE OR POSITION	DATE OF BIRTH	AUTHORITY/RESPONSIBILITY

9. **AGENTS OF THE LABOR ORGANIZATION**

A. List the name, address, title or position, date of birth, and authority of each agent of the labor organization. An agent is any person, whether compensated or not, who is authorized or allowed to represent a labor organization in any employment matter relating to employees employed in a casino hotel, casino or casino simulcasting facility, by a casino licensee, or who undertakes on behalf of the labor organization to promote, facilitate, or otherwise influence the relations between the labor organization and the casino licensee.

Note: Each agent of the labor organization must file a Labor Organization Individual Disclosure Form, regardless of whether the organization is or is not a national or international labor organization.

NAME	ADDRESS	TITLE OR POSITION	DATE OF BIRTH	AUTHORITY/RESPONSIBILITY

10. **PRINCIPAL EMPLOYEES OF LABOR ORGANIZATIONS**

A. List the name, address, title or position, date of birth, duties and authority of each principal employee of the labor organization. A principal employee is any employee of a labor organization who, by reason of remuneration or of a management, supervisory or policy-making position, exercises any authority, discretion or influence, with regard to any matter relating to employees who are employed in a casino hotel, casino or casino simulcasting facility by a casino licensee. For the present purposes, any employee, other than one performing exclusively clerical or custodial services, whose functions relate to employees employed in a casino hotel, casino or casino simulcasting facility by a casino licensee, shall be included, unless the contrary clearly appears from information supplied to the Division.

Note: Each principal employee must file a Labor Organization Individual Disclosure Form, regardless of whether the organization is or is not a national or international labor organization.

NAME	ADDRESS	TITLE OR POSITION	DATE OF BIRTH	DUTIES/AUTHORITY

11. **ADDITIONAL INFORMATION**

Use this page for any additional information required by the questions in this form. Be sure to number the additional information with the number of the corresponding question.

AFFIDAVIT

STATE OF _____:

SS:

COUNTY OF _____:

I, _____, hereby swear (or affirm) that the foregoing
(Name of President/Officer)

statements made by me on behalf of _____
(Name of Labor Organization)

are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

(Signature)

(Type, Stamp or Print Name)

(Title or Position)

Subscribed and sworn to before me
this _____ day of _____, 20__.

(Notary Public)

RELEASE AUTHORIZATION

TO: All Courts, Probation Departments, Selective Service Boards, Employers, Educational Institutions, Banks, Credit Agencies, Financial and Other Such Institutions and All Governmental Agencies – Federal, State and Local, without exception, both foreign and domestic.

On behalf of _____
(Name of Labor Organization)

I, _____, have authorized the New Jersey Division of
(Name of President/Officer)

Gaming Enforcement to conduct a full investigation into the background of the said Labor Organization.

Therefore, you are hereby authorized to release any and all information pertaining to the said Labor Organization, documentary or otherwise, as requested by any employee or agent of the Division of Gaming Enforcement, provided that he or she certifies to you that said Labor Organization has a registration pending before the Division of Gaming Enforcement, or that said Labor Organization is presently a licensee or registrant required to be qualified under the provisions of the Casino Control Act.

This authorization shall supersede and countermand any prior request or authorization to the contrary.

A photocopy of this authorization will be considered as effective and valid as the original.

NOTICE
The Division, in connection with its investigation of this submission, will conduct checks with law enforcement / fingerprint agencies and credit agencies.

(Date)

_____ (Legal Signature)
(Signature of Applicant)

Subscribed and sworn to before me
this _____ day of _____, 20__.

(Notary Public)

(State)

NOTICE

1. Information supplied to the Division of Gaming Enforcement (Division), or otherwise obtained by the Division, is confidential and shall not be revealed, except in the course of the necessary administration of the Casino Control Act (Act), or upon the lawful order of a court of competent jurisdiction, or with the approval of the Attorney General, to a duly-authorized law enforcement agency, pursuant to Section 74.1 of the Act. Nevertheless, an applicant, licensee or registrant waives any liability of the State of New Jersey and its instrumentalities and agents, for any damages resulting from any disclosure or publication, in any manner, other than a willfully unlawful disclosure or publication, pursuant to Section 80b of the Act.

2. An applicant for, or holder of, a license or registration under the Act, is subject to inspections, searches and seizures, as authorized by the Act and by the regulations of the Division. *N.J.S.A. 5:12-80c*. More specifically, Section 79 of the Act, *N.J.S.A. 5:12-79a(6)*, empowers the Division of Gaming Enforcement to conduct searches, administrative inspections and, with the approval of its director, to “inspect the person, and personal effects present in a casino facility licensed under this act, of any holder of a license or registration, issued pursuant to this act while that person is present in a licensed casino facility.”

3. The \$250 filing fee, as required by *N.J.A.C. 13:69A-9.10*, which must accompany the submission of a Labor Organization Registration Statement, is **not refundable** once the registration is accepted for filing. *N.J.A.C. 13:69A-9.19(b)*.

Receipt of Notice Acknowledged on Behalf of: _____
(Name of Labor Organization)

(Date)

(Signature)

(Type, Stamp or Print Name)

(Title or Position)