

**State of California
Office of Administrative Law**

In re:
California Horse Racing Board

Regulatory Action:

Title 04, California Code of Regulations

Adopt sections:

Amend sections: 1596, 2057

Repeal sections:

NOTICE OF APPROVAL OF CHANGES
WITHOUT REGULATORY EFFECT

California Code of Regulations, Title 1,
Section 100

OAL Matter Number: 2026-0225-04

OAL Matter Type: Nonsubstantive (N)

In this section 100 action pursuant to California Code of Regulations, title 1, section 100, the California Horse Racing Board (CHRB) makes nonsubstantive amendments to CHRB Form-101 and updates the version date. CHRB also corrects the version dates for CHRB-25 and CHRB-25A.

OAL approves this change without regulatory effect as meeting the requirements of California Code of Regulations, title 1, section 100.

Date: April 7, 2026



Jenifer Ryan
Senior Attorney

For: Kenneth J. Pogue
Director

Original: Scott Chaney, Executive
Director

Copy: Brooke Tuchman

NONSUBSTANTIVE

For use by Secretary of State only

OAL FILE NUMBER: **Z-** REGULATORY ACTION NUMBER: **2026-0225-04N** EMERGENCY NUMBER:

For use by Office of Administrative Law (OAL) only

OFFICE OF ADMIN. LAW
 2026 FEB 25 PM 4:00

ENDORSED - FILED
 in the office of the Secretary of State
 of the State of California

APR 07 2026
 JS 1:46pm

AGENCY WITH RULEMAKING AUTHORITY: California Horse Racing Board AGENCY FILE NUMBER (if any):

A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE	TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE <input type="checkbox"/> Notice as Proposed <input type="checkbox"/> Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON	TELEPHONE NUMBER	FAX NUMBER (Optional)
OAL USE ONLY <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> ACTION ON PROPOSED NOTICE <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	NOTICE REGISTER NUMBER	PUBLICATION DATE	

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATIONS Transfer After Sale of Horse and Application of a Simulcast Facility	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)
2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLES AND SECTIONS (Including title 26, if books related)	
SECTIONS AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	AMEND
1596 and 2057	REFRAL
4	

3. TYPE OF FILING

<input type="checkbox"/> Regular Rulemaking (Gov. Code § 11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§ 11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, § 11346.1(h))	<input checked="" type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, § 100)
<input type="checkbox"/> Resubmit of disapproved or withdrawn nonemergency filing (Gov. Code §§ 11349.3, 11349.4)	<input type="checkbox"/> Resubmit of disapproved or withdrawn emergency filing (Gov. Code, § 11346.1)	<input type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, § 11346.1(b))	<input type="checkbox"/> Other (Specify)		

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, § 44 and Gov. Code § 11347.1)

5. EFFECTIVE DATE OF CHANGES (Gov. Code §§ 11343.4, 11346.1(d), Cal. Code Regs., title 1, § 100)
 Effective January 1, April 1, July 1, or October 1 (Gov. Code § 11343.4(d))
 Effective on filing with Secretary of State
 15100 Changes Without Regulatory Effect
 Effective other (Specify)

6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY
 Department of Finance (Form STD. 389) (SAM § 56500)
 Fair Political Practices Commission
 State Fire Marshal
 Other (Specify)

7. CONTACT PERSON: Brooke Tuchman TELEPHONE NUMBER: 916-969-3221 FAX NUMBER (Optional): E-MAIL ADDRESS (Optional): batuchman@chr.ca.gov

8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

For use by Office of Administrative Law (OAL) only

ENDORSED APPROVED
 APR 07 2026
 Office of Administrative Law

SIGNATURE OF AGENCY HEAD OR DESIGNEE: C. Scott Chaney DATE: 1/7/2026
 TYPED NAME AND TITLE OF SIGNATORY: C. Scott Chaney Executive Director

PER AGENCY REQUEST
 JR

CALIFORNIA HORSE RACING BOARD
TITLE 4. CALIFORNIA CODE OF REGULATIONS
ARTICLE 6. ENTRIES AND DECLARATIONS
PROPOSED AMENDMENT OF
RULE 1596. TRANSFER AFTER SALE OF HORSE ON THE GROUNDS.

Any Board licensee acting as either seller or purchaser, or their agents or representatives, of a racehorse, prospective racehorse, stallion, or brood mare, which is sold while within the inclosure of a racing association or fair licensed to conduct a live racing meeting, shall immediately notify the stewards of such sale and transfer. The stewards shall require a completed Bill of Sale CHRB Form-101 (3/97 Rev. 10/22), which is hereby incorporated by reference, for any such sale or transfer. If a sale or transfer occurs at an auxiliary stabling facility, a Board-approved training facility, an authorized horse sale or any other location and is sold or purchased by a Board licensee, a completed CHRB Form-101 shall be submitted to the stewards at the nearest racing facility within three (3) calendar days of the sale or transfer.

If the buyer and/or seller do not appear in person before the stewards and/or the stewards cannot independently verify the person's signature, a notarized Bill of Sale, CHRB Form-101, shall be required. CHRB Form-101 shall be available to the public at all Board offices.

Authority Cited: Sections 19420, 19440 and 19525, Business and Professions Code.

Reference: Sections 19420, 19440 and 19525, Business and Professions Code.

PER AGENCY
REQUEST
JH

CALIFORNIA CODE OF REGULATIONS
TITLE 4. BUSINESS REGULATIONS
DIVISION 4. CALIFORNIA HORSE RACING BOARD
ARTICLE 24. INTRASTATE SIMULCAST WAGERING
RULE 2057. APPLICATION AND APPROVAL OF A SIMULCAST FACILITY

No person, which includes any individual, partnership, corporation, or other association or organization, shall conduct or attempt to conduct wagering on the results of races simulcast from a race meeting held in this State unless authorized and permitted to do so by the Board as follows:

(a) A racing association, fair, or other entity proposing to act as a guest association shall complete an Application for Authorization to Operate a Simulcast Wagering Facility, CHRB-25 (Rev. 1/23), which is hereby incorporated by reference. Form CHRB-25 shall be available at the Board's administrative office. The application shall be filed with the Board at least ninety (90) days prior to the first day of racing for review, investigation, and approval based on the following conditions:

(1) In order to allow an evaluation of the competence, integrity, and character of the applicant to operate a simulcast wagering facility, any person, corporation, trust association, partnership, or joint venture shall submit with the application a Personal History Record, CHRB-25A (Rev. 04/23), which is hereby incorporated by reference, for the following:

(A) If the applicant is a corporation, the officers, the directors, and each owner, directly or indirectly, of any equity, security, or other ownership interest in the corporation. However, in the case of owners of publicly held equity securities of a publicly traded corporation, only the names and addresses of those known to the corporation to beneficially own five (5) percent or more of the publicly held securities need be disclosed.

(B) If the applicant is a trust, the trustee and all persons entitled to receive income or benefit from the trust.

(C) If the applicant is an association, the members, officers, and directors.

(D) If the applicant is a subsidiary, the officers, directors, and stockholders of the parent company thereof. However, in the case of owners of publicly held equity securities of a publicly traded corporation, only the names and addresses of those known to the corporation to beneficially own five (5) percent or more of the publicly held securities need be disclosed.

(E) If the applicant is a partnership or joint venture, all of the general partners, limited partners, or joint venturers.

(F) If the parent company, general partner, limited partner, or joint venturer of any applicant is itself a corporation, trust, association, subsidiary, partnership, or joint venture,

then the disclosure of such information shall be made, as necessary, to determine ultimate ownership. However, in the case of owners of publicly held equity securities of a publicly traded corporation, only the names and addresses of those known to the corporation to beneficially own five (5) percent or more of the publicly held securities need be disclosed.

(G) If the applicant employs a management company, disclosure shall apply to the management as set forth in subsections A through F, as appropriate.

(2) The applicant has executed an agreement with a simulcast organization for the conduct of simulcast wagering at its facility; or may act on its own behalf by contracting with simulcast service suppliers and each individual racing association or fair to act as a guest association. A copy of each signed contract must accompany the application, CHRB-25 (Rev. 1/23).

(3) Every licensed simulcast facility shall be inspected by the fire authority having jurisdiction, as dictated by that authority's inspection schedule. After each inspection, a fire clearance by the fire authority must be obtained by the simulcast facility and filed with the Board within ten (10) calendar days of its receipt. This clearance must indicate that the facility meets the standard of fire safety set by the fire authority and that said facility is in compliance with fire safety codes as are applicable in that jurisdiction.

(4) Every simulcast facility shall be equipped with a downlink system consisting of a network broadcast quality satellite receiving antenna coupled with a broadcast specification Ku and/or C band receiver compatible with the encryption system used, with motorized directional control, electrical service, coaxial cabling, or equivalent or industry-accepted cabling, closed-circuit TV monitors and audio system, and a public address system.

(5) The guest association shall provide a patron area for parimutuel wagering and the observation of the satellite signal as received from the host association. The patron area shall be designated on the application by the applicant. Such area shall be the inclosure-public, as defined in Section 2056(j) in this Article, of the simulcast facility. No form of horse racing wagering, either in person or by the use of runners, messengers, or otherwise, shall be permitted outside the inclosure. All odds data made available to the guest association by the host association shall be displayed at all times. For new facilities, the only offices permitted in restricted parimutuel access areas will be those required for operation of the parimutuel system.

(6) The guest association shall appoint, and have on duty while racing is being conducted, a simulcast facility supervisor or an assistant simulcast facility supervisor as defined in Section 2056 (a) and (n) in this Article.

(7) Every person employed by a guest association within the restricted area of the inclosure, as defined in Section 1420(v) in this Division and Section 2056(j) in this Article,

of the simulcast facility is required to be licensed pursuant to Sections 1440 and 1481 in this Division.

(8) Every guest association shall provide security personnel to protect the public and maintain the peace within the simulcast wagering facility. Additionally, the guest association shall maintain such security controls over its inclosure and premises, as defined in Section 1420(q) in this Division, the areas where uplink and downlink equipment is located, fencing, access gates, cables, wires and power lines and warning notifications where uplink and exterior equipment is located, and the equipment room where inside downlink receiving components are located, as the Board's Executive Director or his/her designee shall direct. Guest associations shall also remove, deny access to, eject, or exclude persons as provided by Sections 1980 and 1989 in this Division.

Guest associations shall have the right to request, in writing, that the Chairman of the Board grant a stay from such security controls directed by the Executive Director within seventy-two (72) hours of the directive. If granted, such a stay shall remain in force until an appeal can be considered at the next regularly scheduled public meeting of the Board. An appeal must be submitted, in writing, at least two (2) weeks prior to the meeting date. The directive will be in force until a stay is issued or the Board renders its decision on the appeal. Decisions by the Board shall be final.

(9) No guest association shall conduct wagering on any race or races other than those approved by the Board or simulcast by its host association.

~~(10) No guest association, except as provided for in Business and Professions Code Section 19605.3, may discontinue its operation nor conduct any activity that would cause interruption of the signal without giving the Board and the host association prior written notice within fifteen (15) calendar days of such discontinuance or other change.~~

(11) Plans for new, proposed simulcast facility sites or for the remodeling or alteration of existing sites shall be submitted to the Board for review prior to the preparation of construction drawings. The Board shall review and approve said plans relative to security for the parimutuel operations, placement of data lines, and overall compatibility with Board policy and regulation within thirty (30) working days from the date the plans were received. If applicable, the simulcast organization named in the agreement described in (a)(2) of this Section shall be notified by the guest association of the availability of the plans and shall have the right to review them relative to security for the parimutuel operations and placement of data lines and comment to the Board prior to Board approval or denial of the plans.

(12) In the case of a fair, the Department of Food and Agriculture must approve the application pursuant to the provisions of Sections 19605.1, 19605.2, and 19605.6 of the Business and Professions Code. Such approval is not required for the California Exposition and State Fair and the Los Angeles County Fair.

(b) (1) The Board will notify an applicant in writing within thirty (30) calendar days from the receipt date by the Board's Administrative office if its application is incomplete. This notice will include instructions as to what is required of the applicant to complete the application.

(2) If the applicant fails to submit all documents needed to complete the application within one year from the receipt date of the application by the Board, the Board shall purge said application and all documents submitted thereto and require resubmittal of an application if the applicant, thereafter, intends to procure a license pursuant to this section.

(c) The Board shall approve or deny an application within sixty (60) calendar days from the date the application is deemed complete by the Board.

(d) If the Board denies approval of the application, the applicant has thirty (30) calendar days, from the receipt date of the Board's denial notification, to request a reconsideration of the Board's decision. This request must be in writing and sent to the Board's Administrative office. If reconsideration is denied, the applicant has thirty (30) days to file for Superior Court review in accordance with Section 19463 of the Business and Professions Code.

(e) The approval of the application by the Board shall constitute a license to operate as a simulcast wagering facility, the term of which shall be five years from the date the license is issued, subject to the compliance provisions of Section 19433 of the Business and Professions Code.

(f) Subsequent to the issuance of a license to operate as a simulcast wagering facility under this article, if changes or amendments are made to information or operating procedures contained in an Application, the applicant shall submit a written request to the Board for approval of those changes or amendments. The Board shall approve the request, unless said changes or amendments result in the application failing to meet the requirements of this section.

(g) Each guest association licensed prior to January 1, 2025, pursuant to subsection (a), shall file a new application, form CHRB-25 (Rev. 10/23), by January 1, 2026, to renew its license.

Authority Cited: Sections 19420, 19440 and 19590, Business and Professions Code.

Reference: Sections 19410, 19410.5, 19433, 19460, 19463, 19601, 19605, 19605.1, 19605.2, 19605.6, 19608, 19608.1 and 19608.2, Business and Professions Code; and Sections 15376 and 15378, Government Code.

REPEAL

PER AGENCY
REQUEST
JR

CALIFORNIA HORSE RACING BOARD

PER AGENCY
REQUEST
JR

STATE OF CALIFORNIA

BILL OF SALE

CHRB Form 101 (3/97)

Please print all information

For and in consideration of the terms stated hereinafter,

Seller(s)

hereby sells, transfers and assigns to

Buyer(s)

% of ownership in the horse:

Name of Horse

TB SB Q AR AP P

AGE:

SEX: CERTIFICATE NO.: COLOR OF HORSE:

(a) THE SALE PRICE: \$ PAYMENT METHOD: CASH \$ BALANCE \$

Conditions for payment of balance:

(b) COMMISSION, FEE, GRATUITY, OTHER COMPENSATION FOR BLOODSTOCK AGENT: \$

(c) SELLER(S) EXPRESSLY GUARANTEES THAT THE ABOVE-NAMED HORSE IS FREE AND CLEAR OF ALL DEBTS AND ENCUMBRANCES.

(d) THE HORSE WILL NOW BE IN THE CARE OF

Name of Trainer

(e) OTHER TERMS OF SUCH SALE, TRANSFER AND ASSIGNMENT, IF ANY:

We request that this agreement be registered with the California Horse Racing Board and agree that the Board is not under any obligation for collection of or payment to the Seller or Sellers of any amount under this contingency or other terms of this agreement. I/We certify under penalty of perjury that the statements and answers I/We have made in this Bill of Sale are true and correct.

SELLER(S)

BUYER(S)

1. Typed/printed name of seller License No. Typed/printed name of buyer License No.

Signature of seller or bloodstock agent with Date Signature of buyer or bloodstock agent with Date
Power of Attorney/License No. Power of Attorney/License No.

2. Typed/printed name of seller License No. Typed/printed name of buyer License No.

Signature of seller or bloodstock agent with Date Signature of buyer or bloodstock agent with Date
Power of Attorney/License No. Power of Attorney/License No.

Additional signature blocks on back of form

For office use only

Signature of Recording Steward Date

SELLER(S)

BUYER(S)

PER AGENCY REQUEST JR

3. Typed/printed name of seller License No.

Typed/printed name of buyer License No.

Signature of seller or bloodstock agent with Date Power of Attorney/License No.

Signature of buyer or bloodstock agent with Date Power of Attorney/License No.

4. Typed/printed name of seller License No.

Typed/printed name of buyer License No.

Signature of seller or bloodstock agent with Date Power of Attorney/License No.

Signature of buyer or bloodstock agent with Date Power of Attorney/License No.

5. Typed/printed name of seller License No.

Typed/printed name of buyer License No.

Signature of seller or bloodstock agent with Date Power of Attorney/License No.

Signature of buyer or bloodstock agent with Date Power of Attorney/License No.

6. Typed/printed name of seller License No.

Typed/printed name of buyer License No.

Signature of seller or bloodstock agent with Date Power of Attorney/License No.

Signature of buyer or bloodstock agent with Date Power of Attorney/License No.

State of California) County of _____)

On _____ before me, _____, personally appeared

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature _____ (Seal)

IMPORTANT: IF THE NEW OWNER IS NOT LICENSED TO RACE HORSES IN THE STATE OF CALIFORNIA, HE/SHE MUST OBTAIN A HORSE OWNER'S LICENSE FROM THE NEAREST CALIFORNIA HORSE RACING BOARD OFFICE PRIOR TO ENTERING THE HORSE TO RACE.

ADDITIONALLY, THE OWNER OR TRAINER MUST HOLD WORKER'S COMPENSATION INSURANCE AND SHOW PROOF OF INSURANCE AT THE TIME OF APPLICATION PURSUANT TO BOARD RULE 1501 OF THE CALIFORNIA CODE OF REGULATIONS.

ADOPT

PER AGENCY
REQUEST
JR



STATE OF CALIFORNIA
CALIFORNIA HORSE RACING BOARD
CHRB Form-101 (Rev. 10/22)

BILL OF SALE

PLEASE PRINT ALL INFORMATION

For and in consideration of the terms stated hereinafter,

Seller(s)

Hereby sells, transfers and assigns to

Buyer(s)

_____ % of ownership in the horse: _____

Name of Horse

TB SB Q AR AP P AGE: _____

SEX: _____ CERTIFICATE NO.: _____ COLOR OF HORSE: _____

a) THE SALE PRICE: \$ _____ PAYMENT METHOD: CASH \$ _____

BALANCE: \$ _____ Conditions for payment of balance: _____

b) COMMISSION, FEE, GRATUITY, OTHER COMPENSATION FOR BLOODSTOCK AGENT: \$ _____

c) SELLER(S) EXPRESSLY GUARANTEES THAT THE ABOVE-NAMED HORSE IS FREE AND CLEAR OF ALL DEBTS AND ENCUMBRANCES.

d) THE HORSE WILL NOW BE IN THE CARE OF _____
Name of Trainer

e) OTHER TERMS OF SUCH SALE, TRANSFER AND ASSIGNMENT, IF ANY: _____

We request that this agreement be registered with the California Horse Racing Board and agree that the Board is not under any obligation for collection of or payment to the Seller or Sellers of any amount under this contingency or other terms of this agreement. I/We certify under penalty of perjury that the statements and answers I/We have made in this Bill of Sale are true and correct.

SELLER(S)

BUYER(S)

1. _____
Typed/printed name of seller License No.

Typed/printed name of buyer License No.

Signature of seller or bloodstock agent with Date
Power of Attorney/License No. _____

Signature of buyer or bloodstock agent with Date
Power of Attorney/License No. _____

2. _____
Typed/printed name of seller License No.

Typed/printed name of buyer License No.

Signature of seller or bloodstock agent with Date
Power of Attorney/License No. _____

Signature of buyer or bloodstock agent with Date
Power of Attorney/License No. _____

SELLER(S)

BUYER(S)

3. _____
Typed/printed name of seller License No.

Typed/printed name of buyer License No.

Signature of seller or bloodstock agent with Date
Power of Attorney/License No. _____

Signature of buyer or bloodstock agent with Date
Power of Attorney/License No. _____

4. _____
Typed/printed name of seller License No.

Typed/printed name of buyer License No.

Signature of seller or bloodstock agent with Date
Power of Attorney/License No. _____

Signature of buyer or bloodstock agent with Date
Power of Attorney/License No. _____

5. _____
Typed/printed name of seller License No.

Typed/printed name of buyer License No.

Signature of seller or bloodstock agent with Date
Power of Attorney/License No. _____

Signature of buyer or bloodstock agent with Date
Power of Attorney/License No. _____

6. _____
Typed/printed name of seller License No.

Typed/printed name of buyer License No.

Signature of seller or bloodstock agent with Date
with Power of Attorney/License No.

Signature of buyer or bloodstock agent with Date
Power of Attorney/License No. _____

Signature of Recording Steward

Date

State of California

County of _____

On _____ before me, _____, personally

appeared _____
personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s)
whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they
executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the
instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the
instrument.

WITNESS my hand and official seal.

Signature

IMPORTANT: IF THE **NEW OWNER** IS NOT LICENSED TO RACE HORSES IN THE STATE OF CALIFORNIA, HE/SHE
MUST OBTAIN A HORSE OWNER'S LICENSE FROM THE NEAREST CALIFORNIA HORSE RACING BOARD OFFICE
PRIOR TO ENTERING THE HORSE TO RACE.

ADDITIONALLY, THE OWNER OR TRAINER MUST HOLD **WORKER'S COMPENSATION INSURANCE** AND SHOW PROOF OF
INSURANCE AT THE TIME OF APPLICATION PURSUANT TO BOARD RULE 1501 OF THE CALIFORNIA CODE OF
REGULATIONS.

CALIFORNIA HORSE RACING BOARD
PERSONAL HISTORY RECORD

GENERAL INSTRUCTIONS

This form is to be completed and submitted in conjunction with the following California Horse Racing Board forms:

- CHRB-17 - Application for License to Conduct a Horse Racing Meeting
- CHRB-25 - Application for Authorization to Operate a Simulcast Wagering Facility
- CHRB-87 - Application for Approval as a Concessionaire
- CHRB-86 - Application for License as a Contractor or Sub-contractor
- CHRB-228 - Application for License to Operate a Minisatellite Wagering Facility

If a CHRB-25A, Personal History Record, has been provided within the past five years, submit only the information that has changed.

Answer every question. If a question does not apply, state N/A. Do not misstate or omit any material facts, as each statement made herein is subject to verification. After completing each page, place your initials in the lower right corner of the page, attesting to the accuracy and completeness of the information contained.

Applicants are advised that this Personal History Record is an official document, and any misrepresentations or failure to disclose relevant information may be deemed sufficient cause for the refusal, denial, or revocation of a license.

Applicants are advised that the forms listed above may not be withdrawn without the permission of the Board.

AFFIDAVIT OF APPLICANT

I certify under penalty of perjury that the above statements are true and accurate to the best of my knowledge and belief, that this statement is executed with the knowledge that any misrepresentation or failure to reveal information may be deemed sufficient cause for denial of the application applied for, and that later discovery of an omission or misrepresentation made in the above statements may be grounds for denial or revocation of a license.

Further, I acknowledge that I am voluntarily submitting this application under oath with full knowledge that California Business and Professions Code section 19439 provides that any person who willfully makes and subscribes any certification made under penalty of perjury that is materially false in any particular is guilty of a felony and shall be punished in the manner prescribed by the Penal Code for the punishment of perjury. I understand and agree that I must accept any risk of adverse public notice, embarrassment, criticism, or other action arising from the application processes or financial loss that may result from action with respect to my application, and I expressly waive any claim for damages as a result of such risk and action, provided that any disclosure occurs in the normal course of business by Board staff acting in a reasonable manner when using due care to protect my privacy.

Print Name: _____

Signature: _____

Dated: _____

**CALIFORNIA HORSE RACING BOARD
PERSONAL HISTORY RECORD**

PERSONAL INFORMATION			
Your Full Name (Last, First Middle)			
Other Names, Including Nicknames, You Have Used or Have Been Known By			
RESIDENCE ADDRESS	Street		Apartment/Unit
	City	State	Zip Code
MAILING ADDRESS, IF DIFFERENT FROM ABOVE	Street		Apartment/Unit
	City	State	Zip Code
CONTACT NUMBERS	Home Telephone with Area Code	Business Telephone with Area Code Extension	Other Telephone <input type="checkbox"/> Cell <input type="checkbox"/> Fax _____
E-MAIL ADDRESS(ES)	Home E-Mail		Business E-Mail
PHYSICAL DESCRIPTION	Height	Weight (lbs.)	Hair Color Eye Color
Social Security Number	Driver's License Number	Date of Birth	Place of Birth (City, State)
Are you a US Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No If "No", describe immigration status:			

MARITAL INFORMATION			
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Domestic Partner <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed			
Spouse/Domestic Partner Full Name (Last, First Middle)			
Other Names, Including Nicknames, Used or Have Been Known By			
RESIDENCE ADDRESS	Street		Apartment/Unit
	City	State	Zip Code
Occupation:			
Employer:			
City	State	Zip Code	
CONTACT NUMBERS	Home Telephone with Area Code	Business Telephone with Area Code Extension	Other Telephone <input type="checkbox"/> Cell <input type="checkbox"/> Fax _____
E-MAIL ADDRESS(ES)	Home E-Mail		Business E-Mail
Social Security Number	Driver's License Number	Date of Birth	Place of Birth (City, State)

CALIFORNIA HORSE RACING BOARD
 PERSONAL HISTORY RECORD

EXPERIENCE AND EMPLOYMENT

Beginning with your most recent job you have had, list all jobs, including part-time, temporary, and volunteer positions for the past twenty years, or since or eighteen birthday, whichever is less.

If you have had military experience, which includes reserve duty, enter your military base, assignment(s), or unit assignment. List ALL periods of unemployment in excess of 30 days.

Name of employer or military unit				From (MM/YYYY)	To (MM/YYYY)
Address (number / street / suite / or base)				Contact number	EXT
City	State	Zip Code	Email		
Job Title / Rank	Type of Employment (Check all that apply)				
	<input type="checkbox"/> FT	<input type="checkbox"/> PT	<input type="checkbox"/> Temp	<input type="checkbox"/> Self-employed	<input type="checkbox"/> Volunteer
Duties / Assignments	Reason for leaving				
Was racing or gaming present: <input type="checkbox"/> Yes <input type="checkbox"/> No					
If YES, explain:					

Name of employer or military unit				From (MM/YYYY)	To (MM/YYYY)
Address (number / street / suite / or base)				Contact number	EXT
City	State	Zip Code	Email		
Job Title / Rank	Type of Employment (Check all that apply)				
	<input type="checkbox"/> FT	<input type="checkbox"/> PT	<input type="checkbox"/> Temp	<input type="checkbox"/> Self-employed	<input type="checkbox"/> Volunteer
Duties / Assignments	Reason for leaving				
Was racing or gaming present? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If YES, explain:					

Name of employer or military unit				From (MM/YYYY)	To (MM/YYYY)
Address (number / street / suite / or base)				Contact number	EXT
City	State	Zip Code	Email		
Job Title / Rank	Type of Employment (Check all that apply)				
	<input type="checkbox"/> FT	<input type="checkbox"/> PT	<input type="checkbox"/> Temp	<input type="checkbox"/> Self-employed	<input type="checkbox"/> Volunteer
Duties / Assignments	Reason for leaving				

**CALIFORNIA HORSE RACING BOARD
PERSONAL HISTORY RECORD**

Was racing or gaming present: Yes No

If YES, explain:

FINANCIAL INFORMATION

HAVE YOU EVER FILED FOR OR DECLARED BANKRUPTCY?

YES NO IF YES, explain and include when, where, and the circumstances, as well as which chapter you filed under (i.e., Chapter 7, 11 or 13).

HAVE YOU MADE OR DO YOU INTEND TO MAKE ANY MONETARY INVESTMENT INTO THIS BUSINESS?

YES NO IF YES, state the percentage of ownership.

WILL YOU RECEIVE ANY FORM OF CONSIDERATION (INCLUDING MONETARY) FOR THE SERVICES YOU OR YOUR COMPANY ARE TO PROVIDE?

YES NO IF YES, explain in detail.

WILL YOU RECEIVE OR DO YOU EXPECT TO RECEIVE A PERCENTAGE OF OWNERSHIP OF THIS OPERATION OR BUSINESS IN EXCHANGE FOR THE SERVICES YOU OR YOUR COMPANY ARE PROVIDING?

YES NO IF YES, explain in detail.

LIST ALL INDIVIDUALS WHO SHARE A FINANCIAL INTEREST IN THE OPERATION OF THIS FACILITY, LIVE RACE MEET CONTRACT, OR CONCESSION:

- | | |
|----|----|
| 1. | 4. |
| 2. | 5. |
| 3. | 6. |

HAS YOUR INTEREST IN THIS FACILITY OR OPERATION BEEN ASSIGNED, PLEDGED, OR HYPOTHECATED TO ANY PERSON, FIRM, OR CORPORATION, OR HAS ANY AGREEMENT BEEN ENTERED INTO WHEREBY YOUR INTEREST IS TO BE ASSIGNED, PLEDGED, OR SOLD EITHER IN PART OR IN WHOLE?

YES NO If YES, explain in detail.

CONVICTION INFORMATION

- | | | |
|--|------------------------------|-----------------------------|
| 1. Have you ever been convicted of any criminal offense, excluding minor traffic offenses?..... | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 2. Have you ever been convicted of a gambling-related offense, whether felony or misdemeanor?..... | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 3. Do you have a pending court proceeding for any criminal offense?..... | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

IF YOU ANSWERED "YES" TO ANY OF THE ABOVE QUESTIONS, YOU MUST COMPLETE THE FOLLOWING:

CALIFORNIA HORSE RACING BOARD
 PERSONAL HISTORY RECORD

Charge(s)	Place(s) Department(s)	Date of Conviction
Court (Federal, Superior, etc.)	Final Disposition	
Court Address		
Comments or Explanation		

AUTHORIZATION TO OPERATE

HAVE YOU EVER HELD OR BEEN APPROVED TO HOLD A PRIVILEGED OR PROFESSIONAL LICENSE IN ANY STATE, INCLUDING BUT NOT LIMITED TO ANY OF THE FOLLOW?

<input type="checkbox"/> Racetrack Owner/Operator	<input type="checkbox"/> Horse Trainer	<input type="checkbox"/> Jockey	<input type="checkbox"/> Harness Driver
<input type="checkbox"/> Real Estate Broker	<input type="checkbox"/> Real Estate Salesperson	<input type="checkbox"/> Doctor	<input type="checkbox"/> Lawyer
<input type="checkbox"/> Securities Dealer	<input type="checkbox"/> Boxing Promoter	<input type="checkbox"/> Liquor Distribution	<input type="checkbox"/> Gaming—Ownership/Work Permit
<input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, state where, the years held, and the nature of any disciplinary actions taken against you.		

HAVE ANY OF YOU EVER HELD A FINANCIAL INTEREST IN A GAMBLING VENTURE, INCLUDING A HORSE RACE TRACK, DOG TRACK, RACEHORSE OR DOG, LOTTERY, BINGO VENUE, CASINO, SPORTS BOOK OPERATION, CARD ROOM, OR PARI-MUTUEL OPERATION **OUTSIDE** THE STATE OF CALIFORNIA?

YES NO

HAVE YOU EVER BEEN GRANTED A RACING OR GAMING LICENSE OR AN AUTHORIZATION TO OPERATE A SIMULCAST WAGERING FACILITY OR BEEN A PARTICIPANT IN ANY GROUP THAT HAS BEEN GRANTED A RACING OR GAMING LICENSE OR AN AUTHORIZATION TO OPERATE A SIMULCAST FACILITY?

YES NO

IF YES, HAS THAT LICENSE EVER BEEN SUSPENDED OR REVOKED FOR ANY REASON?

YES NO

HAVE YOU EVER BEEN REFUSED A RACING OR GAMING LICENSE OR AN AUTHORIZATION TO OPERATE A SIMULCAST WAGERING FACILITY FOR ANY REASON OR BEEN A PARTICIPANT IN ANY GROUP THAT HAS BEEN REFUSED A RACING OR GAMING LICENSE OR AN AUTHORIZATION TO OPERATE A SIMULCAST FACILITY?

YES NO

HAVE YOU EVER WITHDRAWN A RACING OR GAMING LICENSE OR AN AUTHORIZATION TO OPERATE A SIMULCAST WAGERING FACILITY FOR ANY REASON OR BEEN A PARTICIPANT IN ANY GROUP THAT HAS WITHDRAWN A RACING OR GAMING LICENSE OR AN AUTHORIZATION TO OPERATE A SIMULCAST FACILITY?

YES NO

TO THE BEST OF YOUR KNOWLEDGE, DO YOU HAVE ANY FAMILY MEMBERS, RELATIVES, ETC. ASSOCIATED WITH OR EMPLOYED IN THE RACING AND/OR GAMING INDUSTRY? (INCLUDE BLOOD RELATIVES OR YOURSELF AND YOUR SPOUSE/DOMESTIC PARTNER TO THE FIRST COUSIN FAMILY EXTENSION.)

YES NO

CALIFORNIA HORSE RACING BOARD
PERSONAL HISTORY RECORD

IF YOU ANSWERED "YES" TO ANY OF THE QUESTIONS ABOVE, PROVIDE DETAILED INFORMATION BELOW (RELEVANT DATES, LOCATIONS, REASONS, ETC.)

ARE YOU CURRENTLY OR HAVE EVER BEEN EMPLOYED OR ENGAGED IN RACING OR SIMULCASTING WITHIN THE STATE OF CALIFORNIA?

YES NO

IF "YES," PROVIDE DETAILED LICENSE INFORMATION (LICENSE TYPE, NUMBER, DATES OF LICENSURE, ETC.).