

- Type or print in black ink and complete all information requested on this form. If you do not, your application will be returned. All information is subject to verification. If you need more space, attach additional sheets.
- All bingo licenses expire one year from the date of issue. To continue conducting live bingo games, you must renew your license prior to the expiration date pursuant to A.R.S. §§ 5-403(C) and 5-410.

1 Applicant's Name <u>James Witkowski American Legion Post 0138</u>	
2a Mailing Address <u>1264 W University Drive</u>	
2b City <u>Mesa</u>	State <u>AZ</u> ZIP Code <u>85201</u>
3a Administrative Office Location <u>Same as above</u>	
3b City <u>Same as above</u>	State <u>AZ</u> ZIP Code <u>85201</u>
4a Name of Contact Person <u>Lawrence Harper</u>	4b Telephone No. <u>602-251-0571</u>
4c E-mail Address <u>Commander@AL138.ORG</u>	4c Fax No. <u>N/A</u>

Falsification of information contained in this application constitutes a Class 6 felony.

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.

88

81 PM

80 RCVD

5 Class B and Class C license applicants only: If applying as a qualified organization, check one box to indicate the type of organization:

- ☐ Charitable
 ☐ Social
 ☐ Religious
 ☒ Veterans
 ☐ Fraternal
 ☐ Volunteer Fire Department
 ☐ Homeowners Association
 ☐ Nonprofit Ambulance Service

6 Class B and Class C license applicants only applying as a qualified organization, provide parent or auxiliary information:

6a Parent Name <u>THE American Legion National Headquarters</u>	6b Auxiliary Name <u>James Witkowski American Legion Post 0138</u>
Address - Number and Street, Rural Rt., Apt. No. <u>700 N. Pennsylvania Street</u>	Address - Number and Street, Rural Rt., Apt. No. <u>1264 W. University Drive</u>
City <u>Indianapolis</u> State <u>IN</u> ZIP Code <u>46206</u>	City <u>Mesa</u> State <u>AZ</u> ZIP Code <u>85201</u>

7 Class B and Class C license applicants only applying as a qualified organization, list the current officers or Board of Directors of the organization:

7a Name <u>Lawrence Harper</u>	7b Name <u>Derek Vitola</u>
Title <u>Post Commander/CEO</u>	Title <u>2nd Vice Commander/ V.P</u>
Address - Number and Street, Rural Rt., Apt. No. <u>2461 E HIGHLAND Street</u>	Address - Number and Street, Rural Rt., Apt. No. <u>1512 W ALAMO DRIVE</u>
City <u>Mesa</u> State <u>AZ</u> ZIP Code <u>85213</u>	City <u>CHANDLER</u> State <u>AZ</u> ZIP Code <u>85224</u>
7c Name <u>John Jones</u>	7d Name <u>JOSHUA GRANT</u>
Title <u>ADUTANT/SECRETARY</u>	Title <u>Finance officer/CFO</u>
Address - Number and Street, Rural Rt., Apt. No. <u>243 N. 69th Street</u>	Address - Number and Street, Rural Rt., Apt. No. <u>1360 S. Bogle CT</u>
City <u>Mesa</u> State <u>AZ</u> ZIP Code <u>85207</u>	City <u>CHANDLER</u> State <u>AZ</u> ZIP Code <u>85286</u>

8 Class B and Class C license applicants only: Bingo checking account information:

Checking Account Number <u>[REDACTED]</u>	Bank Name <u>[REDACTED]</u>	Bank Branch <u>74th St & McDowell</u>
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Received

Scottsdale 85257

OCT 30 2025

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James Witkowski American Legion Post 0139

APPLICATION FOR BINGO LICENSE

to interest-bearing account information:

- 10 Class B and Class C license applicants only: List all officers and/or supervisors authorized to sign checks from the accounts listed above. If applying as a qualified organization, all supervisors must be members of the applicant:

10a Name Lawrence Harper	10b Name JOSHUA GRANT
Title Post Commander/CEO	Title Finance officer/CFO

- 11 List the name(s) of the one or two persons who will serve as managers. If applying as a qualified organization, these persons must be members of the applicant. Each person must submit an affidavit.

11a Name JOSHUA GRANT	11b Name Derek Vitola
Title Finance officer/CFO	Title 2nd Vice Commander/V.P

- 12 List the name of the one person designated as proceeds coordinator. If applying as a qualified organization, this person must be an officer or director and a member of the applicant. Each person must submit an affidavit.

Name Lawrence Harper	Title Post Commander/CEO
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- 13 List the name(s) of the person(s) who will serve as supervisor. If applying as a qualified organization, each person must be a member of the applicant. Each person must submit an affidavit. If additional names are required, please attach affidavits.

13a Name Lawrence Harper	13b Name John Jones
Title Post Commander/CEO	Title ADJUTANT/Secretary

- 14 List the name(s) of the person(s) who will serve as assistants. If applying as a qualified organization, each person must be a member or new member of the applicant. Except for "Class A" licensees, each person must submit an affidavit.

14a Name James J. Baginski	14b Name JOHN Boyle
14c Name Robert T. Council	14d Name Robert Gloster

- 15 Street address of the PHYSICAL location where live bingo will be played:

1264 W University Drive Mesa Az 85201

- 16 Games of Bingo must not exceed 5 days a week. Indicate the time on each respective day that live bingo will be played:

SUN	MON	TUE OFF	WED OFF	THUR	FRI	SAT
11 a.m. 11 p.m.	11 a.m. 11 p.m.	11 a.m. 11 p.m.	11 a.m. 11 p.m.	11 a.m. 11 p.m.	11 a.m. 11 p.m.	11 a.m. 11 p.m.

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Applicant's Name (as shown on page 1)

James Witkowski American Legion Post 0138

APPLICATION FOR BINGO LICENSE

17 Indicate the type of premises where bingo will be played. Check one box:

a ☐ Neither rent nor mortgage will be paid from bingo funds.b ☒ Rented or leased. Attach rental affidavit and copy of rental agreement. ATTACHED

Landlord's Name WESTWOOD ASPIRATIONS LLC	Address - Number and Street, Rural Rt., Apt. No. 7641 E GRAY ROAD		
Telephone Number (with area code) 480-998-5025	City SCOTTSDALE	State AZ	ZIP Code 85260

c ☐ Owned solely by the organization. Attach copy of mortgage, deed of trust, purchase agreement, escrow agreement, or other related document:

Holder of Mortgage N/A	Address - Number and Street, Rural Rt., Apt. No. N/A		
Telephone Number (with area code) N/A	City N/A	State N/A	ZIP Code N/A

d ☐ Owned jointly with other organization. Attach copy of mortgage, deed of trust, purchase agreement, escrow agreement, or other related document:

1) Holder of Mortgage N/A	Address - Number and Street, Rural Rt., Apt. No. N/A		
Telephone Number (with area code) N/A	City N/A	State N/A	ZIP Code N/A
2) Co-Owner Holder: N/A	Address - Number and Street, Rural Rt., Apt. No. N/A		
Telephone Number (with area code) N/A	City N/A	State N/A	ZIP Code N/A
3) Co-Owner Holder: N/A	Address - Number and Street, Rural Rt., Apt. No. N/A		
Telephone Number (with area code) N/A	City N/A	State N/A	ZIP Code N/A

18 List bingo licensees who are or will be conducting bingo in the same premises as you and those licensees located within 1,000 feet of your premises:

18a Name N/A	18b Name N/A
Address - Number and Street, Rural Rt., Apt. No. N/A	Address - Number and Street, Rural Rt., Apt. No. N/A
City N/A	City N/A
State N/A	State N/A
ZIP Code N/A	ZIP Code N/A

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James Witkowski American Legion Post 0138

19 Expected bingo expenses:

a Mortgage: \$ N/A per month

Payable to <u>N/A</u>	Address - Number and Street, Rural Rt., Apt. No. <u>N/A</u>		
Telephone number (with area code) <u>N/A</u>	City <u>N/A</u>	State	ZIP Code

b Rent: \$ N/A per ☐ month ☐ hour ☐ occasion

Payable to <u>N/A</u>	Address - Number and Street, Rural Rt., Apt. No. <u>N/A</u>		
Telephone number (with area code) <u>N/A</u>	City <u>N/A</u>	State	ZIP Code

c Janitorial Services: \$ N/A per ☐ month ☐ hour ☐ occasion

Payable to <u>N/A</u>	Address - Number and Street, Rural Rt., Apt. No. <u>N/A</u>		
Telephone number (with area code) <u>N/A</u>	City <u>N/A</u>	State	ZIP Code

d Accounting Services: \$ N/A per ☐ month ☐ hour ☐ occasion

Payable to <u>N/A</u>	Address - Number and Street, Rural Rt., Apt. No. <u>N/A</u>		
Telephone number (with area code) <u>N/A</u>	City <u>N/A</u>	State	ZIP Code

e Security Services: \$ N/A per ☐ month ☐ hour ☐ occasion

Payable to <u>N/A</u>	Address - Number and Street, Rural Rt., Apt. No. <u>N/A</u>		
Telephone number (with area code) <u>N/A</u>	City <u>N/A</u>	State	ZIP Code

f Bingo Supplies: \$ N/A per N/A

Payable to <u>N/A</u>	Address - Number and Street, Rural Rt., Apt. No. <u>N/A</u>		
Telephone number (with area code) <u>N/A</u>	City <u>N/A</u>	State	ZIP Code

20 Who is your live bingo supplier? (For all bingo supplies). Do you foresee purchasing/renting machines as "technological aids for your live bingo games?"

Nothing purchased until Bingo License secured. Looking at Amazon!
FOR PURCHASE OF CAGE AND ACCESSORIES

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Applicant's Name (as shown on page 1)

James Witkowski American Legion Post 0138

APPLICATION FOR BINGO LICENSE

I, Lawrence S. Harper, under penalty of perjury and upon oath, declare that I am duly authorized to sign and file this application. I hereby swear or confirm that I have read the foregoing application and know the contents thereof and that all information provided has been fully, accurately, and truthfully completed to the best of my knowledge.

APPLICANT'S SIGNATURE

DATE

TITLE

10-21-2025 Commander/CEO

Please mail to:
Arizona Department of Revenue
1600 W Monroe Street, Division Code 22
Phoenix, AZ 85007

☎ (602) 716-7801

REVENUE USE ONLY. DO NOT MARK IN THIS AREA.

☐ Approved

☐ Disapproved

☐ Class A License

☐ Class B License

☐ Class C License

Reviewer's Name (please print)

Date

License Number

Effective Date

Expiration Date