



CG-SCHEDULE C, BARTENDER (NON-MEMBER) LIST

State Form 57151 (10-22)
INDIANA GAMING COMMISSION

Organization legal name	Federal Identification Number (FID/EIN)	CG license number
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Do any of the proposed non-member **bartenders**, listed on this schedule have a felony conviction within the past ten (10) years? Yes No
 If yes, those individual(s) cannot be involved with the organization's gaming activities in any manner and **MUST** be removed from this schedule.

Bartender Information – Use only with the CG-AL License Application. Please list the legal name of those **non-member** individuals who are full time –part time paid bartenders for your organization when selecting Raffle or PPT on page 1, line 21 of the CG-AL. Complete additional Schedule C forms as needed. All areas must be completed.

First Name	MI	Last Name	Date of Birth (mm/dd/yyyy)	Driver's License or State Identification Number	
Complete Home Address (no P.O. Box number's)			Home Telephone Number ()	Date Hired (mm/dd/yyyy)	Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>
First Name	MI	Last Name	Date of Birth (mm/dd/yyyy)	Driver's License or State Identification Number	
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Attach this completed sheet to the Application