| AFFIDAVIT - TO BE COMPLETED BY ALL APPLICANTS/LICENSEES/STOCKHOLDERS |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Name |  |  |  | Sex | Select | Date of Birth |  |
| Address |  |  |  | Length of residence at current address? |  | Place of Birth |  |
| Email Address |  |  |  | Telephone \# |  | Cell Phone \# |  |
| Citizenship Status | Select |  |  | If naturalized naturalizatio | izen, dat |  |  |
| How many shares of stock have been issued to you? |  | \# | \% | What was the | nsiderat | ch share of stock? | \$ |
| Do you have a to be conducted | ancial interest in the business nder the license? | Select |  | Do you understand that a person other than the applicant cannot have a financial interest in the license or the business? |  |  | Select |
| Have you ever been convicted of a felony? |  | Select |  | Explain |  |  |  |
| Have you been found in violation of the laws or rules governing the sale, use or control of alcoholic beverages? |  | Select |  | Explain |  |  |  |
| Have you ever been found guilty of violating a State/Federal law? |  | Select |  | Explain |  |  |  |
| Have you been adjudged guilty of violating the laws for the prevention of gambling? |  | Select |  | Explain |  |  |  |
| Have you ever held a license for the sale of alcoholic beverages? If so, provide the name of the business and location. |  | Select |  | Explain |  |  |  |
| If so, was the business ever found in violation of the laws and rules concerning alcoholic beverages? |  | Select |  | Explain |  |  |  |
| Have you ever had a license for the sale of alcoholic beverages denied or revoked? |  | Select |  | Explain |  |  |  |
| Have you ever been employed at an establishment that sold alcoholic beverage? If so, what position(s)? |  | Select |  | Explain |  |  |  |
| If so, was the business ever found in violation of the laws or rules concerning alcoholic beverages? |  | Select |  | Explain |  |  |  |
| Are you financially interested in another business that has an alcoholic beverage license? If so, where? |  | Select |  | Explain |  |  |  |
| Are you a registered voter in the State of Maryland? |  | Select |  | If the license is issued, will you conform to all laws and regulations relating to the business conducted under this license? |  |  | Select |
| How much time will you spend on the premises? |  |  |  | Have you read the Rules and Regulations? |  |  | Select |

The undersigned applicant hereby certifies that no manufacturer, brewer, distiller, or wholesaler, directly or indirectly, has any financial interest in the premises or business and that I will not hereafter convey or grant any interest, and that I have no indebtedness or other financial obligation, directly or indirectly, to any manufacturer, brewer, distiller, or wholesaler other than for the purchase of alcoholic beverages. Section 6-629 of the
Alcoholic Beverage Article of the Annotated Code of Maryland: If any signed statement, report, affidavit, or oath, required under any of the provisions of this Article, shall contain any false statements, the offender shall be deemed guilty of perjury and upon conviction thereof shall be subject to the penalties by law for that Crime.

## STATE OF MARYLAND

Signature
I hereby certify that on this $\qquad$ day of $\qquad$ , $\qquad$ , personally appeared and made oath of having personal knowledge of the above statement and that they are true and correct.
Witness my hand and official seal.
My commission expires

