

BOROUGH OF HAMPTON
Hunterdon County, State of New Jersey
1 Wells Ave
PO Box 418
Hampton, New Jersey 08827
tel: (908) 537-2329 fax: (908) 537-7097

AFFIDAVIT

NOTE: All members listed in Parts F & G of Raffle/Bingo Application must file an Affidavit

(Please Print)

I, _____, associated with the organization of
_____ having the LGCCC registration number of
_____ do solemnly swear (or affirm) that I am of good moral character and
that I have never been convicted of a crime. I understand that a copy of this Affidavit will be
made part of the Raffle Application and may be forwarded to the State of New Jersey's
Department of Law & Public Safety Legalized Games of Chance Control Commission.

Signature

Date

Notarized by:

(Notary Public of New Jersey)

Date

My commission expires on _____

(Apply Notary Seal Here)