OKLAHOMA HORSE RACING COMMISSION
2401 NW 23rd Street, Suite 78, Oklahoma City, Oklahoma 73107 (405) 943-6472 www.ohrc.org

FINGERPRINT RECIPROCITY AFFIDAVIT -- *FOR LICENSE YEAR 2009 ONLY*

FINGERPRINT RECIPROCITY CAN BE EXTENDED BY THE OKLAHOMA HORSE RACING COMMISSION ONLY WHEN THE FOLLOWING REQUIREMENTS ARE MET:

- An applicant seeking fingerprint reciprocity **must be under the age of 70 years,** and currently licensed OR in good standing in the reciprocal jurisdiction (see participating reciprocal jurisdictions below).
- An applicant MUST have submitted his/her fingerprints to the reciprocal jurisdiction below **during the calender year of 2006, or more recently**. Please contact the reciprocal jurisdiction to verify your fingerprints were classifiable, and the year printed prior to completing this affidavit. Fingerprint reciprocity will not be extended if fingerprints have been returned to that jurisdiction by the FBI or RCMP as unclassifiable, or were last submitted before the 2006 calendar year.
- This Fingerprint Reciprocity Affidavit must be completed by the applicant **in full, signed, and notarized**.

PLEASE COMPLETE THE FOLLOWING

1. **Print Full Legal Name:** _____
(Last) *(First)* *(Middle)*

2. **Social Security Number:** _____

3. **Date of Birth:** _____
(Month - Day - Year)

4. **CIRCLE ONLY ONE of the following reciprocal jurisdictions in which you were fingerprinted:**

Alberta *Colorado* *Idaho* *Illinois* *Kansas* *Minnesota*

Nebraska *New Mexico* *New York* *Ohio* *Ontario*

5. **CIRCLE THE ONE calendar year you were fingerprinted in the reciprocal jurisdiction above:**

2006 *2007* *2008* *2009*

I hereby state that I have submitted completed classifiable fingerprint cards to the one jurisdiction circled above during the calendar year circled above for the purpose of checking any criminal history record which I may have that is maintained by the Federal Bureau of Investigation or the Royal Canadian Mounted Police. I hereby authorize the Oklahoma Horse Racing Commission to request from that racing jurisdiction the release of any information and/or copies of records to determine the validity of this sworn affidavit statement and determination of licensing in Oklahoma.

I understand that I submit this affidavit as part of my occupation license application to the Oklahoma Horse Racing Commission, and that if I were to provide false information or fail to provide complete information on this affidavit, I will be subject to fine and/or will justify the Board of Stewards and/or the Commission to refuse to issue a license, deny, suspend or revoke any and all occupation license(s) which may have been issued to me by the Commission. I certify under penalty of perjury that this affidavit is complete and true, and I knowingly and willingly affix my signature hereto.

_____ _____
Signature of License Applicant *Date*

Signed or attested before me this _____ day of _____, 20_____ .

(SEAL)

My Commission expires: _____ _____
NOTARY PUBLIC