

TO BE COMPLETED BY ALL CLUBS WHEN AN ELECTION OR CHANGE OF OFFICER(S) OCCURS

A F F I D A V I T

\_\_\_\_\_  
NAME OF CLUB

\_\_\_\_\_  
TYPE OF LICENSE (BW) OR (BWL)

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
ZIP

\_\_\_\_\_  
PHONE NUMBER OF CLUB

THIS IS TO CERTIFY THAT THE FOLLOWING NAMED INDIVIDUALS WERE DULY ELECTED AS NEW OFFICER(S) :

PERSONS TO APPEAR ON LICENSE

\_\_\_\_\_  
NAME (PRINT)

\_\_\_\_\_  
AGE

\_\_\_\_\_  
PHONE

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
ZIP

\_\_\_\_\_  
NAME (PRINT)

\_\_\_\_\_  
AGE

\_\_\_\_\_  
PHONE

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
ZIP

\_\_\_\_\_  
NAME (PRINT)

\_\_\_\_\_  
AGE

\_\_\_\_\_  
PHONE

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
ZIP

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
OFFICIAL CAPACITY

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
OFFICIAL CAPACITY

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
OFFICIAL CAPACITY

OFFICER(S) REMOVED:

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
OFFICIAL CAPACITY

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
OFFICIAL CAPACITY

\_\_\_\_\_  
(SIGNATURE)

\_\_\_\_\_  
OFFICIAL CAPACITY

THIS CERTIFIES that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_, the above \_\_\_\_\_ officer(s) appeared before me and signed attesting that the matters and (1) (2) (3) facts contained herein are true.

\_\_\_\_\_  
CLUB SECRETARY

NOTE: Submit this form only to the Liquor Board for approval. If sending by mail, you will be notified when to bring in the current license. If you are walking in the form please include the current license and \$20.00 made payable to Baltimore County, MD.