

Nebraska Lottery Financial Information

PART 3 OF 3

• This form must be attached to Nebraska Lottery Retailer Application

Trade Name as Shown on Nebraska Lottery Retailer Application	Nebraska Tax Identification Number	Federal Employer Identification Number
Contact Person for Your Business (ie, Bookkeeper, Finance Manager)		Phone Number
Nebraska Lottery Regulations require that a Lottery Game Retailed purpose of electronic funds transfer (EFT). To set up an account that you want your account to permit EFT. Your financial insteastablishing a common EFT account and not a wire transfer or creating transferred through your weekly settlement statement from your transferred through your financial institution's EFT system. All creating included in this transfer.	at allows EFT transactions, explatitution must be an ACH receiver edit line transfer account. Our lottery equipment, will be the	and understand that you are amount automatically
Name and Complete Address of Financial Institution (Enter Branch Address if Applicable)	l f	Bank Phone Number
Nine-Digit Routing and Transit Number (Between these symbols I: I: at bottom left of check)	Financial Institution Account Number	Type of Account (must select) Checking Savings
Common Ownership Multiple retail locations under the same ownership (same FEIN established as a chain. This results in one EFT transaction occurri MISC form to be prepared for the entire chain (if required). New location, add to existing "chain" number: Create new "chain" to include following retailer location(s)	ng each week for the entire chain. T	
Weekly statements for "chains" (sent Sunday mornings) can be email Currently receiving statements, no changes needed. Currently receiving statements, need to change information email Begin receiving statements. email	on.	
I hereby authorize the Nebraska Lottery to initiate debit and credit entries to t credit the same to such account. I also authorize the Nebraska Lottery to releas funds transfer. This authorization is to remain in full force and effect until th termination.	se any of the above information as deemed ne	cessary to enable payment by electronic
sign here Signature of Owner, Partner, Member or Corporate Governing Officer	Title	