



# Retailer APPLICATION

ATTN: Customer Support | P.O. Box 321433, Flowood, MS 39232 | Office: 601-487-1387 | E-mail: MLCCustomerSupport@mslot.org

## SECTION F: BANKING INFORMATION

Instructions: Pursuant to the Lottery Act and the Mississippi Lottery Corporation (MLC) Retailer Contract, the Retailer is required to establish a dedicated business bank account, titled "IN TRUST FOR THE MLC," to be used exclusively for lottery transactions. Read the information below and fill in the blanks for the required information. To change the bank account for an existing Retailer, complete Box 1 of Section G. Section G, the Retailer Electronic Fund Transfer Authorization, must be executed by an owner or an authorized representative who must be the same person as the signatory on the bank account.

The Retailer's Depository Financial Institution (DFI) must confirm the establishment of the MLC Trust account by completing and signing Section H on page 7 and attaching a copy of the account Signature Card or a voided check from the in-trust account. For assistance completing Form H, please contact the MLC Customer Support Department at the office number above.

## SECTION G: RETAILER ELECTRONIC FUND TRANSFER AUTHORIZATION

I HEREBY AUTHORIZE the MLC to make automatic withdrawals or deposits each week from or into my business checking account at the DFI named below, and I authorize the DFI to charge such withdrawals or deposits to my listed account. Adjusting entries to correct errors and to collect additional charges, which may include penalties and/or interest, are also authorized. I hereby further authorize and direct the DFI named below to release any information regarding such account, including, but not limited to, account balance information, payment history, and overdraft information to the MLC upon request by an authorized representative of the MLC.

It is agreed that these withdrawals, deposits, and adjustments will be electronically made by the Electronic Fund Transfer (EFT) System under the rules and regulations of the MLC and the National and Local Automated Clearing House (ACH) Associates. I understand that this authorization will remain in effect until thirty (30) days after the date of termination provided on the Retailer's copy of the Termination Form signed and dated by the Retailer and an authorized representative of the MLC.

Check this box if this is to change the account used for an existing retailer account.

RETAILER ID NUMBER:

REQUESTED EFFECTIVE DATE:\*

\*Start with the following Sunday and allow 7 business days. MLC will advise of date effective.

SIGNATURE OF AUTHORIZED PARTY (MUST BE THE SAME AS THE SIGNATURE ON THE BANK ACCOUNT, AN AUTHORIZED REPRESENTATIVE OF THE BUSINESS)

RETAILER AUTHORIZED PARTY SIGN NAME HERE:

RETAILER AUTHORIZED PARTY PRINT NAME HERE:

DATE:

LOTTERY USE ONLY

DATE RECEIVED:

RETAILER ID:



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SECTION H: DFI BANK ACCOUNT VERIFICATION AND ACKNOWLEDGMENT

THIS LETTER MUST BE COMPLETED AND SUBMITTED BY A DFI.

BANK NAME:		BANK BRANCH:	
BANK PHONE NUMBER:		BANK E-MAIL ADDRESS:	
BANK ADDRESS:		BANK CITY:	
BANK COUNTY:	BANK STATE:	BANK ZIP:	
EFT BANK ROUTING NUMBER (9 DIGITS):		EFT BANK ACCOUNT NUMBER:	

PRINT ACCOUNT NAME AS SHOWN AT DFI (BUSINESS NAME AS SHOWN ON YOUR ACCOUNT TO INCLUDE "IN TRUST FOR THE MLC"):

\_\_\_\_\_ "IN TRUST FOR THE MLC"

Depository Financial Institution Acknowledgment: The above business account has been established "IN TRUST FOR THE MLC." By signing below and attaching a copy of this business account Signature Card or voided check, we acknowledge that our account holder, the retailer, has authorized the MLC to make automatic withdrawals or deposits each week from or into the listed business checking account at the DFI named above, and has authorized the DFI to charge such withdrawals or deposits to the listed account, to adjusting entries to correct errors, and to collect additional charges, which may include penalties and/or interest.

We acknowledge that it is agreed that these withdrawals, deposits, and adjustments will be electronically made by the Electronic Fund Transfer (EFT) System under the rules and regulations of the MLC and the National and Local Automated Clearing House (ACH) Associates.

We acknowledge that our account holder, the retailer, has further authorized and directed the DFI named above to release any information regarding such account, including, but not limited to, account balance information, payment history, and overdraft information to the MLC upon request by an authorized representative of the MLC.

We also acknowledge and understand that these authorizations will remain in effect until thirty (30) days after the date of termination provided on the Retailer's copy of the Termination Form that has been signed and dated by the Retailer and an authorized representative of the MLC. At which time, the MLC authorizes the DFI to allow the retailer to close the "IN TRUST FOR THE MLC" account and withdraw any remaining funds.

DFI REPRESENTATIVE SIGNATURE:	DFI REPRESENTATIVE PRINT NAME:	DATE:
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DFI REPRESENTATIVE TITLE:

LOTTERY USE ONLY	DATE RECEIVED:	RETAILER ID:
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