

How to CHANGE your GLC Electronic Funds Transfer Bank Account

Thank you for being an active, contracted GLC retailer. These instructions will assist you in making any change to your existing GLC Electronic Funds Transfer bank account. Remember: the GLC must authorize and approve changes to your GLC Electronic Funds Transfer Bank Account prior to using the account.

Complete the Lottery Retailer Electronic Funds Transfer Authorization Form

List all information requested on the LOTTERY RETAILER ELECTRONIC FUNDS TRANSFER AUTHORIZATION form. Please include your GLC Retailer ID# on all correspondence.

Section 1: List the name of the entity which owns the business and files Income tax returns.

Section 2 through 4: List the required state issued licensing numbers for this location from the Georgia Department of Revenue (State Tax Identifier, Sales Tax, & Alcohol).

- Section 5: List the Federal Employers ID Number (FEIN) for this business. Sole Proprietors must list their social security number.
- **Section 6:** Be sure to read the RETAILER AUTHORIZATION, then complete all information requested. Be sure to sign and date the Signature of Retailer section.
- **Section 7:** Must be completed and signed by the Bank Representative.

We have also included a letter to your Bank Representative which provides an example of the account title requirements.

Please include your GLC Retailer ID# on ALL correspondence.

When you have completed the Lottery Retailer Electronic Funds Transfer Authorization Form, either fax the completed form to 404-215-8997, or mail to:

RCA Georgia Lottery Corporation P. O. Box 56486 Atlanta, GA 30343

Important: we will notify you when your change request has been completed. Do not begin using the new bank account until you have received approval from the GLC.

If you have any questions, call 1-800-746-8546 Option #4.



Retailer Application GEORGIA LOTTERY CORPORATION

P.O. Box 56486 • Atlanta. GA 30343

1-800-746-8546 - OPTION #4 then #7 - Retailer Contracts Administration

Revised 4/1/18

PART 3 - Lottery Retailer Electronic Funds Transfer Authorization

Lottery Retailer ID#:

1. Corporate or Legal Name (list the name of the legal entity which owns the business and files income tax returns):

2. Georgia State Tax Identifier Number (11	3. Georgia Alcohol License Number (if any, 7 digits):
	Federal Employers ID Number. 9 digit number used to file Federal business income tax return. (For Sole Proprietor use Social Security Number)

INSTRUCTIONS: The Retailer must establish a separate electronic funds transfer (EFT) bank account for the preservation and transfer of lottery funds. The separate bank account must be specified "IN TRUST FOR THE GEORGIA LOTTERY CORPORATION." The Retailer's depository institution must confirm the establishment of the Georgia Lottery Corporation Trust Account by signing in the space below.

6. RETAILER AUTHORIZATION: I (we) hereby authorize the Georgia Lottery Corporation to initiate debit and credit entries in any available and appropriate amount to my (our) account indicated below and authorize the depository named below to debit or credit the same to such account. I (we) hereby further authorize and direct the depository institution named below to release any information regarding such account, including, but not limited to, account balance information, payment history, and overdraft information to the Georgia Lottery Corporation upon request by an authorized representative of the Georgia Lottery Corporation. My (our) authorization is given in accordance with subsection (e)(2) of Section 502 of the "Gramm-Leach-Bliley Act of 1999" (15 U.S.C.A. § 6802) and shall remain in effect until expressly revoked by me (us) in writing. Any such revocation shall be deemed to have been properly given if sent by hand delivery, or by overnight courier, to such depository institution at the address set forth below. Such revocation shall be deemed to have been delivered on the date of delivery if by hand delivery or if by overnight courier, on the next business day following the deposit of such communication with the overnight courier.

Bank Account Name: Corporate or legal name of entity which o	/"IN TRUST FOR THE GEORGIA LO	
Bank Name (print):		
Bank Street Address:	City:	State:
EFT Bank Route Transit Number:		
EFT Bank Account Number:		
Signature of Owner or Principal:		Date:
Printed Name of Owner or Principal:		

THE SECTION BELOW MUST BE COMPLETED BY DEPOSITORY INSTITUTION (BANK)

7. DEPOSITORY INSTITUTION ACKNOWLEDGMENT: The above account has been established "IN TRUST FOR THE GEORGIA LOTTERY CORPORATION." We acknowledge that our customer, the Retailer, has directed us to provide information concerning the above referenced account to the Georgia Lottery Corporation upon request by an authorized representative of the Georgia Lottery Corporation. We further acknowledge that the Retailer has directed us to provide this information in accordance with subsection (e)(2) of Section 502 of the "Gramm-Leach-Bliley Act of 1999" (15 U.S.C.A. § 6802), and we will continue to provide such information as directed until receipt of Retailer's written revocation in the manner set forth in Section 6 above.

Depository Institution Representative (print):____

Telephone Number:

Signature of Depository Institution Representative:

Date:



Dear Bank Representative:

Thank you for assisting our Retailer applicant. The Retailer must establish a separate electronic funds transfer (EFT) bank account in order to complete their Georgia Lottery Corporation application. This separate bank account must be specified "In Trust For the Georgia Lottery Corporation."

Example:

XYZ, Inc. D/B/A RCA Food Mart In Trust for the Georgia Lottery Corporation

Please ensure that the account is not titled "Lottery Account."

If you need any additional information, or have any questions, please contact Retailer Contracts Administration at 1-800-746-8546 option #4 then #7.