



Electronic Fund Transfer (EFT)/Payments Authorization

Retailer ID Number: _____

Retailer: _____ Retailer Phone: _____
Location Name

Retailer Business Address _____
Street Address City State Zip

I (we) authorize **OREGON STATE LOTTERY** to initiate debit/credit electronic entries to my (our): -Select One-
TYPE OF BANK ACCOUNT:

Checking Account (copy of VOIDED check required) Savings Account (copy of Savings deposit Slip required)

BANKING INFORMATION:

FINANCIAL INSTITUTION NAME (PLEASE PRINT) _____

ACCOUNT NUMBER: _____

ROUTING NUMBER _____

CITY, STATE and ZIP CODE _____

INTERNATIONAL ACH DETERMINATION: Indicate by checking the box below if you have payment instructions to transfer funds from a Non US Financial Institution to a US Financial Institution explicitly for funding of this debit transaction: (EXAMPLE: US Company is owned by an International Company and there are instructions in place to transfer the entire and exact funds to a US Financial institution specifically to fund this debit transaction.)

I have payment instructions in place with a non US Financial Institution to transfer **the entire and exact funds** to my US Financial Institution identified above for the specific purpose of funding this recurring debit transaction.

Changes to your ACH Direct Debit Authorization:

Please contact Oregon State Lottery with any changes to your ACH Debit Authorization. I acknowledge that the origination of ACH transactions to the authorized account must comply with the provisions of Oregon and U.S. law.

How to Revoke your Authorization:

This authority will remain in full force and effect until Oregon State Lottery has received written notification from me (or either of us) of its termination so as to afford the interested parties a reasonable time to act on it.

Name: (Print) _____ Signature & Date _____

Name: (Print) _____ Signature & Date _____

Place a copy of voided check or savings account deposit slip here
Fax Completed form to 503-540-1482
or mail to: Oregon State Lottery
P.O. Box 12649-Salem, OR 97309

ACH Debit Authorization Instructions:

- Fill in your name at the top of the form.
- Mark the box before type of account to indicate whether your payment will be deducted from your checking or savings account.
- Attach a voided check for verification of all financial institution information. If you are unable to attach the voided check, please be sure you fill in your account number and routing number.
- This authorization authorizes the state to debit your account on a regular basis. If your checking account authorized for this debit has a debit filter/block in place, please contact Oregon State Lottery to obtain the company ID. This 10 digit number will need to be provided to your bank to allow the debit transaction to process through your account successfully.
- If you are funding this debit with specific payment instructions to move **the entire and exact funds** from a bank outside the United States to a US financial institution, please check the box indicating this. A representative from the state will contact you with more instructions on how this payment will be processed. Depending on how this transaction is funded, you may not be able to have your account automatically debited by the state agency you are working with.
- ***Be sure to sign the form and return to the Agency:***
 - ***Fax back to: 503-540-1482***
 - ***mail to: Oregon State Lottery***
P.O. Box 12649
Salem, OR 97309

(OVER)