

This box is for Retailer Licensing Only

Retailer Number: _____

Retailer Name: _____

ELECTRONIC FUNDS TRANSFER (EFT) AUTHORITY

I HEREBY AUTHORIZE THE New Mexico Lottery to make automatic withdrawals or deposits each week from or into my business checking account which is at the following Depository Financial Institution (DFI) (name of your bank) _____ in (City) _____ and 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.

It is agreed that these withdrawals, deposits, and adjustments will be electronically made by the Electronic Funds Transfer System under the rules and regulations of the New Mexico Lottery and the National and Local Automated Clearing House (ACH) Associates. I understand that this Authority will remain in effect at least fourteen (14) days of submitting a change of account to the New Mexico Lottery. I HAVE ATTACHED A VOIDED CHECK (No deposit slips) TO THIS FORM FOR THIS ACCOUNT.

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

Retailer #: _____ Retailer Name: _____

Account Name as shown on your bank account:

Business Name (this name MUST be registered with your bank):

Street Address (physical address of business where you sell New Mexico Lottery products):

City:

State:

Zip Code:

STAPLE VOIDED CHECK OR COPY OF CHECK HERE FROM THE ACCOUNT TO BE USED FOR EFT SWEEP
OR ATTACH A LETTER FROM YOUR FINANCIAL INSTITUTION INDICATING THE ACCOUNT NUMBER,
ROUTING NUMBER, AND CONFIRMATION IT IS A CHECKING ACCOUNT

NMLA CANNOT PROCESS PAYMENTS THROUGH SAVINGS ACCOUNTS

DO NOT USE A DEPOSIT SLIP

Sign Here:

Print Name Here:

Date:

This form must be signed by the owner of record or authorized signer.