

LOTTERY RETAILER CONTRACT SIGNATURE FORM



IDAHO LOTTERY
P.O. BOX 6537
BOISE, ID 83707

FILL OUT THIS FORM AND RETURN TO THE LOTTERY OFFICE.

PLEASE DO NOT WRITE IN THIS BLOCK

Application/Retailer #: _____
(Office Use ONLY)

This contract is made by and between the Director, Idaho State Lottery, herein after (Lottery) and the Lottery Retailer (Retailer) named below who sells Idaho Lottery products. This contract supersedes any prior representation, understanding, or agreement with regard to the subject matter hereof.

1. **LEGAL ENTITY NAME (AS SHOWN ON YOUR TAX RETURN):**

STORE NAME (NAME VISIBLE TO THE PUBLIC):

ADDRESS (actual physical store location)

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

2. This contract represents the entire agreement between the parties who agree to be bound by its terms and conditions. (A copy of the Retailer's contract has been provided.)

The person signing this contract, warrants and represents that he/she has the full right, power and authority to execute this contract on behalf of the Retailer.

SIGNATURE

(Proprietor, Partner, Corporate Officer)

PRINT NAME

TITLE

DATE

INDICATE HERE the Lottery product(s) you would like to be licensed to sell.

ALL Lottery Products: Scratch Games, Draw Games and PullTabs

PullTabs Only

RETAILER SECTION