

Retailer's Notice of Intent to Discontinue Lottery Product Sales

PO Box 8941 Madison, WI 53708-8941 Phone: (608) 267-4804 Fax: (608) 264-6644 wilottery.com

Outline 4. Desires a Information								
Section 1: Business Information								
Business Name	ess Name			Retailer Number/Chain Head Number				
Business Address			Forwarding Address (for final credit/statement)					
City	State	Zip Code	City			State	Zip Code	
Section 2: Requestor Information								
Name/Title	Phone							
Email	Fax							
Section 3: Chains Only (If location is not a chain, skip to Section 4)								
For each closing location, complete the below. Attach supplemental sheet if needed.								
Business Name(s)	Retailer Number(s)/Chain Head Number(s) Business Address				(es), City, State, Zip Code			
Section 4: Discontinuing Sales								
Effective Date:								
Reason(s) for Discontinuing Sales:								
☐ I hereby notify the Wisconsin Lottery that I intend to discontinue selling Lottery products on and the Lottery will								
deactivate the Lottery terminal on the effective date.								
The effective date may be changed if notification is received by the Wisconsin Lottery prior to the Lottery terminal being deactivated.								
deactivated.								
Beginning on the effective date, I must cease selling Lottery products, and (if applicable) the Lottery terminal(s) will be deactivated.								
Unsold instant scratch tickets in saleable condition may be returned for credit. No credit will be received for unsold pull-tab tickets as stated in my Retailer Contract.								
as stated in my Netaller Contract.								
I must promptly surrender all Lottery property to the Lottery, including Lottery point-of-sale materials, player-education materials,								
ticket dispensers, and my Certificate of Authority.								
After the effective date, I will continue to be contractually obligated to maintain sufficient funds in my electronic funds transfer								
(EFT) account to cover any balance owed or which becomes owed to the Wisconsin Lottery.								
Section 5: Authorized Signature								
AUTHORITY TO EXECUTE THIS NOTICE AND BIND THE RETAILER: The individual who signs below and executes this notice,								
warrants and represents to the Wisconsin Lottery, that they have the full right, power and authority to execute this notice on behalf of								
the retailer and to fully bind the retailer	to the terms	of this notice.						
Name (please print)				Company or Title				
Authorized								
Agent Signature Sign Here						Date		
Olgii Hele								