



Charitable Bingo Operations Division

Manufacturer/Distributor Delinquent Purchaser's Liability/Liability Paid Report

(Rev. 2/09)

WHO MUST SUBMIT THIS FORM

This form should be submitted by a manufacturer or distributor who has not received payment for equipment or supplies purchased by a conductor, accounting unit or distributor organization within thirty days after the date of actual delivery. This form should also be submitted by a manufacturer or distributor who has previously notified the commission of an outstanding amount due from an organization that has now paid the liability in full. Organizations will be placed on or removed from the Delinquent Purchaser List maintained by the commission based on the type of notice.

FORM SUBMISSION

By mail: Charitable Bingo Operations Division, Texas Lottery Commission, PO Box 16630, Austin, TX 78761-6630 Via Fax: (512) 344-5142

FOR ASSISTANCE in completing this form, please call 1-800-BINGO-77 (1-800-246-4677) or visit our Web site at www.txbingo.org.

GENERAL INFORMATION

- Please print legibly or type.
Complete each section of the form.
The Liability Paid in Full Date should be entered if the form is being used for a Liability Paid Report.
This form must be signed by the person designated as the contact person on the form or an officer of the owed organization.

TYPE OF NOTICE

Delinquent Liability Liability Paid

OWED ORGANIZATION

Name of Manufacturer/Distributor

Taxpayer Number

Name of Individual Contact (PLEASE PRINT)

Daytime Phone Number of Contact (incl. Area Code) Fax Number

Enter the date the Delinquent Purchaser Organization was notified of the amount owed..... MM DD YYYY

DELINQUENT ORGANIZATION

Delinquent Purchaser Organization Name

Taxpayer Number

Purchase Date Amount Owed

Payment Due Date Liability Paid in Full Date

sign here Signature of Contact Person or Officer Print Name & Title Date