



Charitable Bingo Operations Division

Schedule E1 – Authorization of Representation for Accounting Unit

(Rev. 3/10)

WHO SHOULD SUBMIT THIS SCHEDULE

This form must be submitted by any accounting unit desiring to designate an individual, other than the designated agent or Unit Manager, to receive documents and act on behalf of the accounting unit concerning matters relating to the accounting unit's compliance with the Bingo Enabling Act or Charitable Bingo Administrative Rules or any corrective measures to be taken after an audit or field investigation.

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 INSTRUCTIONS

- Please print legibly or type.
• For a new authorized representative, this form must be signed by the Bingo Chairperson or an officer of the unit member organization for EACH member of the accounting unit. For an existing authorized representative for an accounting unit, this form must be signed by the Bingo Chairperson or an officer of the NEW unit member organization.

AUTHORIZED REPRESENTATIVE INFORMATION

The [] []
Unit Name Unit Taxpayer Number

designates the following individual as an authorized representative:

[]
Name (LAST, FIRST, MIDDLE INITIAL)

[] - [] - [] [] []
Social Security Number Driver's License Number State

[]
Home Address (Street address, PO Box, or Rural Route (Do Not enter PO Box or Directions, i.e., 5 miles north of I-20))

[] [] [] []
City State Zip Code Phone (Area Code & Number)

[] [] [] []
Race Gender Date of Birth (MM/DD/YYYY) E-mail Address (optional)

We request the above named individual be designated as an authorized representative and be recognized as such by the Texas Lottery Commission, Charitable Bingo Operations Division. Authorized representative status extends only to the individual named above and does not include their agents or employees. We understand that the designation for "Authorized Representative" does not confer signatory authority. We also understand that this individual will remain an authorized representative for the accounting unit with all of the rights and privileges associated until such time as the commission receives a written request from the authorized representative or the Bingo Chairperson of each member organization to remove this individual from this position or the member organization leaves the accounting unit.

1 [] []
Name of the Member Organization Taxpayer Number

sign here [] [] []
Signature of the Bingo Chairperson or Officer Print Name and Title Date

2 [] []
Name of the Member Organization Taxpayer Number

sign here [] [] []
Signature of the Bingo Chairperson or Officer Print Name and Title Date

3 [] []
Name of the Member Organization Taxpayer Number

sign here [] [] []
Signature of the Bingo Chairperson or Officer Print Name and Title Date

4 [] []
Name of the Member Organization Taxpayer Number

sign here [] [] []
Signature of the Bingo Chairperson or Officer Print Name and Title Date

5 [] []
Name of the Member Organization Taxpayer Number

sign here [] [] []
Signature of the Bingo Chairperson or Officer Print Name and Title Date