



Responsible Lottery Official Designation

FORM 1

This form may be dropped off at
any Lottery office or mailed to:
Minnesota Lottery
PO Box 130700
St. Paul, MN 55113

SECTION 1 Retailer Information:

Retailer Number _____

Retailer Name _____

SECTION 2 Responsible Lottery Official Designation:

Please list your Responsible Lottery Official(s). "Responsible lottery official" means an officer, director, or owner of an organization, firm, partnership, or corporation that have oversight of lottery ticket sales.

Please note, if you are a sole proprietor, you are the Responsible Lottery Official. If your business is an organization, firm, partnership, or corporation, any officer, director, or owner that has oversight of Lottery ticket sales can be your Responsible Lottery Official. Your Responsible Lottery Official should not be a store manager or supervisor, unless that person also is an officer, director, or owner of your business.

If you are a government-owned business (including a tribal-owned business), you must designate a Responsible Lottery Official to the best of your ability. Failure to designate a person may result in a delay in renewal or cancelation of your lottery contract. Attach a separate page if necessary.

LAST NAME	FIRST NAME	MIDDLE INITIAL	M/F	BIRTH DATE	SOCIAL SECURITY #
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HOME ADDRESS	CITY	STATE	ZIP CODE	PHONE NUMBER
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LAST NAME	FIRST NAME	MIDDLE INITIAL	M/F	BIRTH DATE	SOCIAL SECURITY #
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HOME ADDRESS	CITY	STATE	ZIP CODE	PHONE NUMBER
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AUTHORIZED SIGNATURE:

I am the owner or person authorized to continue our contract with the Minnesota State Lottery as a retail outlet for the sale of lottery games. I certify that the information I have provided to the Minnesota State Lottery is true and complete. I UNDERSTAND THAT MAKING A MATERIALLY FALSE OR MISLEADING STATEMENT OR MATERIAL OMISSION IN INFORMATION SUBMITTED TO THE MINNESOTA STATE LOTTERY IS A FELONY. I authorize a State Agency to conduct investigations into criminal history, financial and credit information, delinquent taxes and other matters pertaining to the authenticity of statements made in this document. I agree my electronic signature is the legal equivalent of my handwritten signature.

PRINT FULL NAME

SIGNATURE

DATE

If you have any questions, please contact us at contracts@mnlottery.com, or at 651-635-8119.