

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

FORMID 34

WHO MUST SUBMIT THIS FORM

This form must 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: Texas Lottery Commission, Charitable Bingo Operations Division, 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 website at txbingo.org.

GENERAL INFORMATION

- Use black or blue ink only.
- 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 Papart

	t be signed by the person designat				ınization.		
TYPE OF NOTIC	Delinquent Liability	☐ Liability Paid					
OWED ORGANIZ	ZATION						1
Name of Manufacturer/	Distributor						
Taxpayer Number							
Name of Individual Con	steet (DLEACE DDINE)						
Name of Individual Con	IIIII (FLEAGE FNINT)						
Daytime Phone Numbe	er of Contact (incl. Area Code)		Fax Number				
Enter the date the Deli	nquent Purchaser Organization was notified c	f the amount owed		MM	DD	YYYY	
DELINQUENT O	RGANIZATION						ı
Delinquent Purchaser C	Organization Name						
Taxpayer Number							
Purchase Date	Amount	Owed					
Payment Due Date		Paid in Full Date					
Payment Due Date	Liablility	Paid in Full Date					