



CREDIT RELEASE

Pursuant to Maine law, 9-B MRSA Section 162 (1), I hereby authorize the Maine State Lottery to obtain any necessary financial information or records from any credit bureau, financial institution or business reference pertaining to the credit history of the business or individual named below.

For an entity:

Name of Entity: _____

Type of Entity: _____

Name and capacity of authorized person: _____

Signature of authorized person: _____

Date: _____ Account Number: _____

For an individual, sole proprietorship or partnership:

Name and Capacity: _____

Signature: _____

Date: _____ Account Number: _____

Name of Financial Institution: _____

Contact Person(s) at Financial Institution: _____

Address of Financial Institution: _____

Telephone Number: _____

Please attach a voided check or deposit slip to this form.