



**ALL ADJUSTMENT REQUESTS MUST BE
RECEIVED BY THE LOTTERY WITHIN 14 DAYS
OF THE DATE THE TICKET WAS PRODUCED.**

RETAILER NUMBER:

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STORE NAME: _____

REQUESTED AMOUNT: \$ _____ DATE AND TIME OF PROBLEM: _____

REASONS: *(Check one)* .

PAPER JAM

 PRINTER FAULT

 READER

 MULTI DRAW

□ MISCELLANEOUS

☐ COULD NOT CANCEL

PROMOTIONAL OFFER

GAME: (Check one)

 KENO

POWERBALL

 PICK 3

 PICK 4

 CASH BALL

 CASH POP

MEGA MILLIONS

 MILLIONAIRE FOR LIFE

OTHER

* PLEASE ATTACH REPRINT IF ORIGINAL TICKET OR ANY PIECES OF THE TICKET ARE NOT AVAILABLE.

GIVE DETAILED EXPLANATION OF PROBLEM, INCLUDING DATE AND APPROXIMATE TIME THE PROBLEM OCCURRED.

This section must be completed or request will be rejected.

Retailer Signature: _____ Date: _____

Note: Lottery accounting will subtract commissions from applicable adjustments.

ACCOUNTING USE ONLY:



DEBIT

 CREDIT

GAME

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REASON CODE

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A 3x7 grid with three dots in the 6th column.

REQUESTED AMOUNT

LESS COMMISSIONS

ADJUSTMENT AMOUNT

Reference:

Accounting Signature: _____ Approved By: _____