

Electronic Payment Request Form

Department of Charitable Gaming
132 Brighton Park Blvd
Frankfort KY 40601
(502) 573-5528 or (800) 729-5672
FAX (502) 573-6625
www.DCG.KY.GOV

Please complete the following information:

License Number _____

Name of Licensee _____

Mailing Address _____

Name and Title of Officer Requesting Electronic Payment _____

Name of Bank _____

Name of Account as it Appears on Statement _____

9 Digit Routing Number _____

Account Number _____

Description of Payment (i.e. Renewal Fees, Financial Report Fees, etc) _____

Amount _____

All payments must be made by the organization's charitable gaming account.

Electronic Payments may be submitted by US mail, fax, or email to:

Tammy Downey, Administrative Branch Manager

TammyJ.Downey@ky.gov