### WINNER CLAIM FORM

**Instructions on the Back of this Form**

For more information, visit our website at [www.nylottery.ny.gov](http://www.nylottery.ny.gov)

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#### CLAIMANT - COMPLETE THIS SECTION

All information must be completed. **PLEASE PRINT CLEARLY.**

1. **Legal Last Name, First Name and Middle Name**
   - [ ]
   - [ ]
   - [ ]
   - [ ]

2. **Claimant Type (Check one)**
   - [ ] Individual
   - [ ] Corporation
   - [ ] Partnership
   - [ ] Trust
   - [ ] Other
   - [ ] Multiple Claimants
     Each claimant must complete a separate claim form. Shared prize amounts must total validated ticket amount.

3. **Address**
   - [ ]
   - [ ]
   - [ ]
   - [ ]

4. **City**
   - [ ]
   - [ ]
   - [ ]
   - [ ]

5. **State**
   - [ ]
   - [ ]
   - [ ]
   - [ ]

6. **Zip Code**
   - [ ]
   - [ ]
   - [ ]
   - [ ]

7. **Country**
   - [ ]
   - [ ]
   - [ ]
   - [ ]

8. **Date of Birth**
   - [ ]
   - [ ]
   - [ ]
   - [ ]

9. **Residency/Citizenship (Check one)**
   - [ ] US Resident/Resident Alien
   - [ ] Non-Resident Alien
     (Provide country of citizenship below)

10. **Phone Numbers**
    - **Primary**
      - [ ]
      - [ ]
      - [ ]
      - [ ]
    - **Secondary**
      - [ ]
      - [ ]
      - [ ]
      - [ ]

11. **Email**
    - [ ]
    - [ ]
    - [ ]
    - [ ]

12. **U.S. Social Security Number or Taxpayer Identification Number**
    - [ ]
    - [ ]
    - [ ]
    - [ ]

13. **Are you a New York City resident?**
    - [ ] Yes
    - [ ] No

14. **Are you a Yonkers resident?**
    - [ ] Yes
    - [ ] No

15. **Do you own a store that sells lottery?**
    - [ ] Yes
    - [ ] No

16. **Are you employed by a lottery retailer/sales agent?**
    - [ ] Yes
    - [ ] No

17. **Are you related to someone who owns or works at a lottery retailer/sales agent?**
    - [ ] Yes
    - [ ] No

18. **If “yes” to #15, #16, or #17, provide store name and address.**
    - [ ]

19. **Are you 18 years of age or older?**
    - [ ] Yes
    - [ ] No
    - If No, see N.Y.S. Tax Law § 1613(b)

### ACCEPTABLE FORMS OF PHOTO IDENTIFICATION

All must be valid and current.

- [ ] US/Foreign Passport
- [ ] Driver or Non Driver ID
- [ ] Driver Learner Permit
- [ ] State/Gov’t ID
- [ ] US Military ID
- [ ] Certificate of Naturalization
- [ ] Certificate of Citizenship
- [ ] Permanent Resident Card-Green Card
- [ ] Birth Certificate and a form of photo ID with name

**Social Security Card or Taxpayer ID Certification must be presented with these forms of ID.**

- [ ] New York City ID
- [ ] New York State Benefit ID Card
- [ ] MTA Reduced Fare MetroCard

### FOR LOTTERY USE ONLY

- **PRIZE AMOUNT** __________________________
- **CHECK AMOUNT** __________________________
- **CHECK NUMBER** __________________________

- **CLAIM NUMBER** __________________________
- **PROCESSED BY** __________________________
- **DATE** __________________________
Complete information requested on the back of winning ticket(s).

Complete this claim form and sign.

Enclose winning ticket(s)/voucher(s).

Enclose copy of Acceptable Forms of Identification (must be valid and current).

- US/Foreign Passport
- Driver or Non Driver ID
- Driver Learner Permit
- State/Gov’t ID
- US Military ID
- Certificate of Naturalization
- Certificate of Citizenship
- Permanent Resident Card-Green Card
- Birth Certificate and a photo ID with name

Mail to:
N.Y.S. Gaming Commission, Division of Lottery
P.O. Box 7533
Schenectady, NY 12301-7533

Allow approximately 15 business days for processing. Jackpot prizes may take longer.