CLAIM FORMINQUIRY

## LOTTERY



## CLAIMANT SECTION - PLEASE PRINT CLEARLY

The information requested on this Claim Form will be used to validate and process your claim in accordance with Ohio Lottery Commission Rules and Regulations and the Revised Code, and to comply with federal tax requirements. Failure to provide the information requested will delay the processing of your claim. Except for your social security number, the information on this Claim Form may also constitute a public record pursuant to Revised Code section 149.43.

## INSTRUCTIONS:

Sign your name and print your name on the back of the ticket. Complete items 1 through 12 below. Sign this Claim Form, and if the prize amount is $\$ 600$ or greater, then also affirm that you either are, or are not, in default of a child/spousal support order. Be sure to include the original ticket and Pay to Bearer or File Claim Form receipt. Keep a copy of all documentation of this claim for your records. SEE BACK FOR MORE DETAILS.
1.

LAST NAME (PRINT)
FIRST NAME (PRINT)
$\overline{\mathrm{MI}}$
2.

ADDRESS (CANNOT USE P.O. BOX)

(
ADDRESS (CANNOT USE P.O. BOX)
3.

6. ${ }^{\text {SOCIAL SECURITY NUMBER }}$
9. Are you a Lottery Retailer?

YES NO
$\square \quad \square$
7. ( DAYTIME AREA
$)$
DAYTIME AREA CODE AND PHONE NUMBER
10. Are you employed by a Lottery Retailer?

YES NO
4.

STATE
5. $\overline{\text { ZIP CODE }}$
8.
DATE OF BIRTH (MM/DD/YY)
11. Are you related to a Lottery Retailer?
YES NO

Retailer Number:
12. If YES to any of the above, provide the following - Retailer Name:

## CERTIFICATION

I hereby certify that all information provided by me on this Claim Form is true and accurate to the best of my knowledge and that the ticket has not been unlawfully obtained, made, altered, forged or counterfeited. I understand that my name, voice, signature, photograph, image or likeness will not be used by the Lottery for commercial purposes without my separate written consent.

## W-9 CERTIFICATION

I hereby certify that: (1) the number shown on this form is my correct taxpayer identification number; (2) I am not subject to backup withholding; and (3) I am a U.S. Citizen (including U.S. Resident Alien).

## AFFIRMATION

## If the prize amount claimed is $\$ 600$ or greater I further affirm the following:

I am / am not (circle one) in default of an administrative or court order in Ohio requiring the payment of child or spousal support (Knowingly making a false affirmation regarding default under a child or spousal support order is a criminal offense under Revised Code section 3770.99(B)).

## CASHING LOCATION USE ONLY

## RETAILER CLAIM PROCESSING INFORMATION

## AFTER VALIDATING AN ORIGINAL TICKET THAT PRODUCES A PAY TO BEARER OR FILE CLAIM FORM RECEIPT, ATTACH THE RECEIPT AND ORIGINAL TICKET TO THE CLAIM FORM AND GIVE ALL DOCUMENTS TO THE CLAIMANT.

## RECEIPT TYPES AND PAYMENT OPTIONS

- A Cash/Pay receipt is generated when the prize amount is less than $\$ 600$. Such payments are the responsibility of the Lottery retailer.
- A Pay to Bearer receipt is generated when the prize amount is from $\$ 600$ to $\$ 5,000$. Payment options are authorized cashing locations or check processing.
- A File Claim Form receipt is generated when the prize amount is over $\$ 5,000$. Prize winners must follow the check payment procedures below. If the prize is a jackpot or an annuity prize (for example, $\$ 100,000$ per year for 20 years), call your nearest Ohio Lottery Regional Office to make an appointment to submit the claim.
I. CASHING LOCATIONS METHOD OF PAYMENT

Requires presenting a completed Claim Form, a Pay to Bearer receipt, and original ticket to an authorized cashing location to obtain same day payment. Proper identification is required. A valid photo identification (for example, a driver's license) containing the ticket holder's current address will fulfill this requirement.

## CASHING LOCATIONS PROCEDURES

1. Claimant signs the original ticket and presents it to the Lottery retailer for validation.
2. Lottery retailer will validate the original ticket.
3. Lottery retailer will give the claimant the Pay to Bearer receipt AND the original ticket (or staple both documents to the Claim Form).
4. The claimant will present all documents to an authorized cashing location.

## II. CHECK PAYMENT METHOD

Check will be processed within 30 business days, free of charge, unless circumstances such as payment of child or spousal support, State debt or incomplete information require additional processing time. This payment method is optional for prize amounts from $\$ 600$ to $\$ 5,000$ and is required for any prize amount over $\$ 5,000$.

## CHECK PAYMENT INSTRUCTIONS

1. Claimant will present a signed original ticket to a Lottery retail location for validation.
2. Lottery retailer will give the claimant the Pay to Bearer/File Claim Form receipt, AND the original ticket.
3. Claimant will sign the Pay to Bearer/File Claim Form receipt.
4. The Claim Form must be completed and signed, regardless of state/county residence.
5. Mail the Claim Form, original ticket, and receipt(s) registered or certified to:

> The Ohio Lottery - Room 452
> 615 West Superior Avenue
> Cleveland, Ohio 44113-1879

If you send by mail, keep a copy of the Claim Form, original ticket, and receipts for your records.

## VALIDATION

All tickets have limited validation periods established by the Ohio Lottery. Present rules call for tickets to be cashed within 180 days of the draw date, purchase date of EZPLAY Games, or 180 days from the game closing for Instant Tickets.

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## REGIONAL OFFICES:

Cleveland
1100 Resource Drive Brooklyn Heights, OH 44131 216-774-5671

## Toledo

315 Arco Drive
Toledo, OH 43607
1-800-589-6442
Dayton
7462 Webster Street
Dayton, OH 45414
1-800-589-6463

## Cincinnati

10840 Kenwood Road
Cincinnati, OH 45242
1-800-589-9882

## Columbus

780 Morrison Road
Columbus, OH 43230
1-800-589-6445

## Athens

190 West Union St. Suite 101
Athens, OH 45701
1-800-589-6466

## Akron-Canton

5926 Mayfair Road
North Canton, OH 44720
1-800-589-6467

## Youngstown

242 Federal Plaza West
Youngstown, OH 44503
1-800-589-6468

## Lorain

300 West Erie \& Broadway Lorain, OH 44052 1-800-589-6469

## THE OHIO LOTTERY IS NOT RESPONSIBLE FOR LOST MAIL

Claimant may also validate the ticket and complete Claim Form at any of the Ohio Lottery's Regional Offices

