



Winner Claim Form

CONGRATULATIONS!

Cash all prizes of \$599 or less at your participating Lottery Retailer

PLAYER INFORMATION

LAST NAME

DATE OF BIRTH
MONTH DAY YEAR

FIRST NAME MI SUFFIX SSN/TIN

ADDRESS 1

ADDRESS 2

CITY STATE ZIP CODE

COUNTRY E-MAIL

PHONE
AREA CODE

I do not have a Social Security Number (Check this box only if you do not have a SSN)

I am NOT a US Citizen and I am NOT a Resident Alien

Are you a Lottery Retailer? Yes No Are you employed by a Lottery Retailer? Yes No Are you related to a Lottery Retailer? Yes No

By volunteering to answer the following questions, you will help the Lottery know more about its players. Your responses will not be sold or disclosed to the public.

Which of the following do you consider yourself to be? (Check all that apply) African American Asian Hispanic White Other (specify) _____

Annual Household Income Under \$20,000 \$20,000 to \$35,000 \$35,000 to \$50,000 \$50,000 to \$75,000 Over \$75,000

Education Did not finish High School Graduated High School or GED Some College Graduated College

Gender Male Female Occupation (Check all that apply) Student Employed Unemployed Retired

Number of People in Household: _____ (including yourself)

TICKET INFORMATION

Attach winning Scratchers® ticket to this form with your name and address showing.

Print Name (One Person Only) _____
Daytime Phone _____
Address _____
City _____ State _____ Zip _____ MADE IN U.S.A.
Signature _____ FallSafe®

TICKET NUMBER - XXXX-XXXXXXX-X-XXXXXX

SCRATCHERS

Print your name, street, address, city, state and zip code and sign your name on the back of the ticket.

TICKET NUMBER

18-DIGIT NUMBER ON THE BACK OF TICKET

PRIZE CLAIMED \$

Attach winning draw game ticket to this form.

SuperLotto PLUS
calottery 01 02 03 04 05 06
SAT JAN 01 03
R1234567 XXXX-XXXXXXXX-XXXXXX

Ticket number is also located in the same area on all draw game tickets.

BL NAME (Print one name only) _____ Date of Birth _____
ADDRESS (print) _____
PHONE (_____) _____ (AREA CODE) _____ (861)3
SIGNATURE _____

Your ticket, not the play slip is your valid receipt. Check your ticket immediately to ensure the information is correct. Sign the back of your ticket to indicate ownership. Winning tickets must be redeemed within 180 days after the draw in which the prize was won, except for the multi-state jackpot or grand prize tickets, which must be redeemed within one year after the draw in which the prize was won. There may be different claiming periods for raffles, entries, coupons, and promotions. Check your ticket selections for accuracy. Ticket cancellation rules apply. You must present this ticket as proof of your selections to claim a prize. Determination of winners is subject to the rules and regulations of the California Lottery. Lotto Game Jackpots paid in annual payments or players may choose the cash value payments in one lump sum. Call 1-800-LOTTERY for more information. Must be 18 or older to purchase a ticket or claim a prize. Play Responsibility Problem Gambling Help Line 1-800-GAMBLER ©2013 California Lottery

Print your name, street, address, city, state and zip code and sign your name on the back of the ticket.

TICKET NUMBER

18-DIGIT NUMBER ON THE FRONT OF TICKET

PRIZE CLAIMED \$

I declare, under penalty of perjury and the laws of the State of California including but not limited to California Penal Code sections 118 and 72, that I am the rightful owner of the winning ticket on this form, that I am 18 years of age or older and that all information provided is true and correct. I understand that any person who, with intent to defraud, falsely makes, alters, forges or counterfeits a Lottery ticket is in violation of state law and could be liable for criminal penalties.

Winner's Signature (Only one signature and it must match signature on ticket) _____ Date _____

FOR DISTRICT OFFICE USE ONLY			
PLAYER I.D. CODE	DIST. OFFICE CODE	DATE RECEIVED	POST MARK DATE
DRAW DATE	INITIALS	CONTROL NUMBER	

FOR DISTRICT OFFICE USE ONLY		
CODE(S)		
REASON		
RELEASED	INITIALS	FINAL
CRN		



PLEASE READ ALL INFORMATION AND INSTRUCTIONS BEFORE COMPLETING CLAIM FORM

Failure to provide your original signed winning ticket, social security number, date of birth, name and complete address (including apartment or space number), city, state, zip code and phone number may delay or prevent the Lottery from processing your prize claim or result in additional federal taxes withheld from your prize. Lottery prizes are not subject to California state income tax.

If you are not a U.S. citizen or a resident alien, the Lottery is required by federal tax law to withhold additional taxes from your prize. The Lottery is required to withhold federal taxes of 25% for U.S. citizens and resident aliens providing a social security number, and 28% for U.S. citizens and resident aliens not providing a social security number. Players who select "I am NOT a US Citizen and I am NOT a Resident Alien" box will have 30% withheld from all prizes. Federal tax rates are subject to change.

1. Print your name, street address, city, state and zip code on the back of the ticket.
2. Sign your name on the back of the ticket.
3. Complete the Player Information and Ticket Information sections on the front of this form.
4. Sign the front of this form with ink. (ONLY ONE SIGNATURE IS PERMITTED)
5. Staple your ticket to the front of this form.

KEEP A COPY OF THIS FORM AND A COPY OF THE TICKET.

(Include all of the identification numbers shown on both sides of the ticket)
For additional copies of this form see www.calottery.com/win

MAIL THIS CLAIM FORM, WITH THE TICKET STAPLED ON THE FRONT, TO:
California Lottery, 730 North 10th Street, Sacramento, CA 95811-0336

PRIZE PAYMENT INFORMATION

Claims submitted to Lottery Headquarters for processing are paid by check from the California State Controller's Office. If you do not receive your prize within eight weeks, contact the Lottery at 1-800-LOTTERY (568-8379), Monday through Friday, 8:00am to 5:00pm.

A Multiple Ownership Claim Form is available for group players (less than 100) sharing prizes of \$1,000,000 or more. You may request a Multiple Ownership Claim Form by calling 1-800-LOTTERY (568-8379) or by visiting any Lottery District Office.

PRIVACY NOTICE

The Information Practices Act of 1977 (Cal. Civ. Code §§ 1798-1798.78), the Federal Privacy Act (Public Law 93-579), 5 U.S.C. § 552a, and Cal. Gov. Code §§ 11015.5 and 11019.9, require that this notice be provided when collecting personal information from individuals.

The Player Information requested on this form will be used to validate and process your claim in accordance with the California State Lottery Act of 1984 (Gov. Code §§ 8880 et seq.). The Lottery requires a player's social security or tax identification number (SSN/TIN) for tax withholding and reporting purposes, pursuant to Internal Revenue Code sections 6011, 6041, 6109, 3402, and the regulations enacted thereunder.

The Player Information you provide may be disclosed to various state and federal government agencies, including but not limited to: the State Controller's Office, Franchise Tax Board, Health and Welfare Agency and the Internal Revenue Service.

The voluntary information that you provide regarding your ethnicity, household income, education, gender, and occupation will only be used by the Lottery to conduct internal demographic studies (which may be completed by agents, contractors, and third-party affiliates). It will not be disclosed to any state or federal government agency or members of the public.

You have the right to access your personal information maintained by the Lottery by contacting the California Lottery, 700 North 10th Street, Sacramento, CA 95811-0336 — Attention: Public Records Act Coordinator.

Purpose and Relevancy of Information Collected: Information is collected to validate and process a claim and for purposes of sales, marketing, research, security investigation, legal review, surveys, and strategic planning as related to the operations of the Lottery. By submitting this claim, you consent and agree to such use, and waive any and all legal claims, known, or unknown, related to the specified uses set forth herein. The California Lottery is subject to public disclosure laws that allow access to certain governmental records. Your full name, the name and location of the retailer who sold you the winning ticket, the date you won, and the amount of your winnings, including your gross and net installment payments, are matters of public record and are subject to disclosure. The Lottery will not disclose any other personal or identifying information without your permission unless legally required to do so. No information will be collected or accepted from known minors. You may be asked to participate in a press conference.

Tickets, transactions, purchases, claims and prize payments are subject to federal and state law and California Lottery regulations, policies and procedures. Copies of regulations are available at Lottery District Offices and on our website at www.calottery.com. Tickets failing validation are void.



Postage
Required
Post Office will
not deliver
without proper
postage.

CALIFORNIA LOTTERY
730 NORTH 10TH STREET
SACRAMENTO CA 95811-0336

