

Notes:

Winner Claim Form

Instructions to Claimant:

Please print legibly in black or blue ink.

Complete items 1-11 and sign bottom of form.

Fill out and sign back of ticket.

Colorado Lottery P O Box 7 Pueblo, CO 81002-0007 1.800.999.2959 Revised 11/20/2013

1. Claimant Type (Check one) Individual Partnership Corporation Trust Estate Individual claiming for a group – IRS form 5754 MUST be attached to this claim form. Form 5754 will not be accepted at a later date.).																		
2. Social Security Number, FEIN, or ITIN *Name and Taxpayer ID# provided must match with IRS.																																	
3.	LEG	AL I	Nan	ne o	f Win	ner a	and	Mai	ilin	g Ad	dress					•				•													
	Nan	ne pi	rint	ed h	ere r	nust	exa	ctly	ma	atch	name	on ti	cket	t. In	clude	spac	es	as r	eed	ed.	I	Т	- 1			Т	- 1		l		I		1
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City																									L	State	e				Zip (Code	
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4. 1	Telephone Number 5. Date of Birth (MM																					6. Gender											
													· [T.					1 3	_	male	е									
7. 0															"	8. Identification																	
	US Citizen - MUST provide Social Security Number in #2 above.														Type: Driver's License Passport Other																		
	□ Resident Alien – MUST provide Social Security Number in #2 above. □ Non-Resident Alien – please provide country of citizenship:																																
Number State of Issuan															nce																		
9. JACKPOT WINNERS ONLY Lotto: Player has 90 days from date of claim to change payment date of																																	
option from Annuity to Cash.																																	
Powerball/Mega Millions: Player has 60 days after becoming													If yes: Employer:																				
L	entitled to a prize to elect a Cash Annuity Undecided payment option.														Contact:Number:																		
rec (A)	11. By my signature hereto, I indemnify the Colorado Lottery for any loss which may result if any of the foregoing information is not true and accurate. I understand that the Colorado Lottery is a state agency and therefore my name, city of residence and prize amount is public record and may be made available for public information. Under penalty of perjury, I declare that to the best of my knowledge and belief (A) the name, address and taxpayer identifying number, which I have furnished, correctly identify me as the recipient of this payment, and (B) I am not a person disqualified by statute or regulation from claiming and/or accepting a prize from the Lottery; and that: (CHECK ONE)																																
	 □ No other person is entitled to any part of these payments; OR □ The information provided on the attached form 5754 correctly identifies each person entitled to any part of this payment. 																																
ide with chi 26-	*SOCIAL SECURITY NUMBER REQUIRED if the amount of any one prize is \$600 or more. If you do not provide the Lottery with a tax identification number and elect not to report your residency status, your prize will be subject to the Internal Revenue Service non-resident withholding requirements. Colorado and/or Federal Law require the Lottery to check Social Security Numbers for the purpose of enforcing child support, spousal support, criminal restitution laws, and state debt intercept. (See C.R.S. sections 26-13-118, 26-13-106, 24-35-212(5), 26-13-106(1) and 16-18.5-106.5, 5 U.S.C. section 552a and 42 U.S.C. sections 405(c)(2)(C)(vi) and 651 et seq.) If you are in arrears, the Lottery is required to withhold the amount in arrearage or the entire prize, whichever is less.																																
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Accurint Checked - Initials

☐ Mega Millions ☐ Pick 3

☐ Other _