

# Congratulations WINNER !!!

Last Name

DATE  -  -   
Lottery Use Only

**UNDER PENALTIES OF PERJURY, I certify that**

- 1) the number shown on this form is my correct United States taxpayer identification number; (or I am waiting for a number to be issued to me); **AND**
- 2) I am not subject to backup withholding because:
  - (a) I am exempt from backup withholding, or
  - (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or
  - (c) the IRS has notified me that I am no longer subject to backup withholding, **AND**
- 3) I am a United States person; U.S. citizen/ U.S. resident alien **AND**
- 4) I am exempt from Foreign Account Tax Compliance Act (FATCA) reporting.

Required for single ticket  
prize over \$600

**TAX ID NUMBER (SSN, ITIN, ATIN)**

-  -

**X**

Signature of United States person

Date

Valid ID REQUIRED to claim  
all prizes at a Lottery office

**PRINT FIRST NAME**

**TOTAL PRIZE AMOUNT**

\$  ,  ,  ,  .

**MIDDLE NAME(s)**

**PRINT Your Name On Your Ticket(s)**

**PRINT LAST NAME**

JR, SR, III, etc.

**PO BOX or ADDRESS to RECEIVE MAIL**

**TO CLAIM BY MAIL:**  
Send Original Ticket(s) &  
Claim Form to:

**APT, LOT, SUITE, etc.**

Louisiana Lottery Corporation  
Attn: Prize Payment  
PO Box 90010  
Baton Rouge, LA 70879-0010

**CITY**

**STATE ZIP**

**DAYTIME TELEPHONE NUMBER**

-  -

Area Code

**U S CITIZEN**

YES  NO

**I am claiming for a group**

NO  YES

Attach completed IRS Form 5754 with this claim  
to share the tax obligation with group

**DATE OF BIRTH**

-  -

MONTH DAY YEAR

I declare under penalty of perjury, that the name, address, and taxpayer identification number I provided correctly identifies me as the recipient of this prize, and to the best of my knowledge, I am not prohibited by Louisiana Lottery Corporation law from purchasing a ticket or winning a lottery ticket or winning a lottery prize. I understand that presenting an altered, forged, or counterfeit lottery ticket in an attempt to defraud, violates state law.

THIS CLAIM IS PUBLIC RECORD

**X**

Signature of Claimant

Date

Processed by:

Claim Number(s)

Check Number(s)

NUMBER OF TICKETS RECEIVED

LOT PB MM P3 P4 E5 RFL

Scratch LT MT HT



W2-G(s) reviewed & received

Check(s) received

Initials

**For Lottery Use Only**

The undersigned legal representative acknowledges delivery and receipt of the prize described above on behalf of the claimant, and hereby releases the Louisiana Lottery Corporation from any and all claims related to the payment of the prize.

**X** \_\_\_\_\_

LEGAL REPRESENTATIVE'S SIGNATURE