



WINNER CLAIM FORM

Please follow instructions carefully and fill out this form completely to avoid delays.
Questions? Contact us at 208-334-2600.

Claim No.

Check No.

INSTRUCTIONS FOR CLAIMANT:

- SIGN and print your name and address on the back of the winning ticket.
- Complete and sign this form.
- Include a copy of your driver's license or government issued photo ID.
- **BY MAIL:** Send your entire ticket, copy of ID, and completed form to:
IDAHO LOTTERY, P.O. BOX 8687, BOISE, ID 83707
(Registered mail is recommended.)
- **IN PERSON:** Bring your ticket, photo ID and completed form to the Idaho Lottery located at 1199 Shoreline Ln, Ste #100, Boise, Idaho

YOU MAY WISH TO KEEP A PHOTOCOPY
OF BOTH SIDES OF YOUR TICKET

PLEASE SEND YOUR ENTIRE TICKET.

DO NOT CUT, STAPLE OR IN ANY WAY
DAMAGE YOUR TICKET.

IDAHO LOTTERY USE ONLY

DATE PROCESSED					PROCESSED BY					
M	M	D	D	Y	Y					
Retailer Name:					Retailer #:					
Street Address:										
City:		Sales Rep:			Rep Number:					

CLAIMANT INFORMATION:

1. FIRST NAME																							
2. LAST NAME																							
4. ADDRESS																							
5. CITY					6. STATE			7. ZIP CODE															
8. PHONE NUMBER			9. COUNTRY		10. BIRTH DATE				11. SEX														
12. US RESIDENT		13. DATE PURCHASED				14. PRIZE CLAIMED							+00										
15. TICKET NUMBER																							

SCRATCH TICKETS: 24 digit number found above barcode on back of ticket. DRAW TICKETS: 35 digit number found on front of the ticket just above the barcode at the bottom.

16. IS THERE MORE THAN ONE CLAIMANT?	YN	If the answer is YES, how many persons are claiming this prize? _____ What percentage of the prize are YOU claiming? _____% <i>The total claimed percentages must add to 100%.</i>
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I declare, under penalty of perjury, that I am 18 years of age or older and that all information provided is true and correct to the best of my knowledge. I understand that any person who, with intent to defraud, falsely makes, alters, forges or counterfeits a state lottery ticket is in violation of state law. Pursuant to IDAPA 52.01.01 Section .035, Sub-section 17, the Idaho Lottery may use the name, city and photograph of winners in any Idaho Lottery promotional campaign. Any exceptions to this rule must be submitted to the Idaho Lottery Director in writing for approval.

IMPORTANT NOTICE:

After this form is completed and submitted to the Lottery, the percentages cannot be changed.

WINNER'S SIGNATURE: _____ DATE: _____

SHARE YOUR STORY: wooh!

We'd love to hear your winning story in your words. Why you decided to buy the ticket? How are you going to use your winnings? Where were you when you found out you won, and what did you do? Who did you call first? Please be as specific as you can and feel free to use the space below and back of this sheet as needed.



WINNER CLAIM FORM ADDENDUM

PLEASE CHECK YES or NO:

YES NO I currently (OR within the past 6 months) own or work for a business who sells Idaho Lottery products.

YES NO I am related to or live in the same household as someone who owns/works for a business who sells Idaho Lottery products.

If **YES**, to either statement above:

What is the name of the business?

Where is the business located?

CITY/TOWN

By signing this form, I hereby certify the above is true and correct.

Signature _____

Date _____

Per Idaho Code 67-7425, it is a felony to willfully omit disclosure or provide false information.