NEW YORK LOTTERY CLAIM FORM

WINNING TICKET INFORMATION
All information must be completed

ONLINE TICKET INFORMATION

CHECK GAME BOX - MARK ONLY ONE BOX

- ☐ **NUMBERS**
- ☐ **WIN 4**
- ☐ **LOTTO**
- ☐ **TAKE FIVE**
- ☐ **QUICK DRAW**
- ☐ **PICK 10**
- ☐ **MEGA MILLIONS**

ENTER DATE OF WINNING TICKET ____________________

ENTER WINNING TICKET NUMBER

|_|_|_|_| - |_|_|_|_|_|_|_|_|_|_| - |_|_|_|_|_|_|

ATTACH WINNING TICKET / VOUCHER HERE

(Be sure to sign the back of the winning ticket)

Allow approximately 15 working days for processing.
You must be 18 or older to play all New York Lottery games.

INSTANT GAME TICKET INFORMATION

ENTER INSTANT GAME TICKET NAME:

____

ENTER TICKET NUMBER LOCATED ON FRONT OF TICKET

|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|

ENTER THE 12 DIGIT NUMBER ABOVE THE BARCODE LOCATED ON THE BACK OF THE TICKET

|_|_|_| - |_|_|_|_|_|_| - |_|_|_|

VIDEO GAMING VOUCHER INFORMATION

ENTER THE 18 DIGIT NUMBER LOCATED UNDER THE BARCODE LOCATED ON THE FRONT OF THE VOUCHER

|_|_|_|_| - |_|_|_|_| - |_|_|_|_| - |_|_|_|_| - |_|_|

CLAIMANT INFORMATION
All information must be completed

CFW

Last Name ____________________ First Name ____________________ Initial ____

Street Address ____

Street Address ____

City ____________________ State ____ Zip Code ____________ Country ____________

Area Code ____ Telephone Number ____________ Social Security Number (Required) ____________

email address:
(optional) ____

CIRCLE YES OR NO FOR EACH QUESTION

Are you a New York City resident? YES NO Are you a Yonkers resident? YES NO Are you a Non-resident Alien? YES NO

Under penalty of perjury, I declare that I am the lawful owner of the ticket(s)/voucher(s) identified above; that the name, address and taxpayer identification number correctly identifies me as the recipient of this payment; that I obtained the ticket(s)/voucher(s) in accordance with New York State Law and the Lottery's Rules and Regulations. I understand that New York Lottery prizes are public funds and that to maintain public confidence in the New York Lottery prize winners must be publicly announced. I agree to attend a press conference to discuss my prize, unless the New York Lottery decides otherwise.

I authorize the New York Lottery to use any photographic or video-graphic replication of my likeness or any audio replication of my voice, in any medium (including but not limited to newspaper, television, radio and internet) for purposes of marketing, advertising or trade of the New York Lottery. I agree not to hold the New York Lottery or the state of New York responsible for any unauthorized use or misuse of my likeness by third parties.

CLAIMANT'S SIGNATURE ____ **DATE** ____________