

ILOTTERY CLAIM FORM

Claim Date: _____

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A person who claims a lottery prize grants the D.C. Lottery the right to use his or her full name, city, county, and state of residence, prize amount, and photograph or likeness for the purpose of winnings, advertising, and promoting lottery games or goodwill for the D.C. Lottery. 30 **DCMR** 614.5.

A person commits a criminal offense who falsely makes, alters, forges, counterfeits, presents or alters a lottery ticket with intent to defraud. The willful making of a written false statement to any agency of the District Government is punishable by criminal penalties. Information from this claim form may be required to be released pursuant to the D.C. Freedom of Information Act. D.C. Code 2-531, et. seq.

All lottery winnings over \$600 are reported to the Internal Revenue Service and are considered income and as such are taxable according to the applicable Federal, District, state and local laws.

Game Name: _____

Date of Win:

Voucher ID:

Claimant - Complete This Section

1. Name Mr. C				
		Last	First	
2. Address				
3. City		4. Sta	ate 5. ZIP	
6. Phone	7.	DOB	8. iLottery Acco	ount User ID
9. Claimant 🗆 /De	signator 🗆 ID: a) SSN		b) Prize Designate	d to:
c) License	□ /Non-Driver No. □ & Stat	e		
d) Passpo	rt			
10. Non-Resident	Alien? No 🗆 Yes 🗅			

If yes, Non-Resident Alien No.

I certify, under penalties of perjury, that the claimant information listed above is true and correct, that I have reviewed the above Notice, and that I am the owner of the iLottery Account and Voucher ID presented.

Claimant's Signature			Date		
Lottery Off	icial - Complet	e This Section			
Powerball 🛛	Mega Millions	e-Instant	Amount Won:		
Voucher ID:					_
Check No.:		Check Amount: \$		Check Date:	_
Validated by: _		Processed b	y:	_ Approved by:	_