	WINNER CLAIM FORM Instructions on the Back of this Form Visit a Georgia Lottery District Office Or Mail to: Georgia Lottery Corporation P.O. Box 56966 Atlanta, GA 30343					
LOTTERY®			STAPLE WINNING TICKET HERE PLEASE DO NOT STAPLE THROUGH ANY NUMBERS, BARCODE OR PLAY AREA ON THE TICKET!			
For more information, visit our website at www.galottery.com CLAIMANT - COMPLETE THIS SECTION						
1. NAME AS LISTED WITH THE INTERNAL RE						
2. CLAIMANT TYPE (CHECK ONE) INDIVIDUAL CORPORATION PARTNERSHIP TRUST OTHER						
3. ADDRESS						
4. CITY	5. STATE	6. ZIP	CODE			
7. COUNTY OR PROVINCE		8.	- DATE OF BIRTH MM-DD-YYYY			
9. CITIZENSHIP (CHECK ONE)			NE NUMBERS			
U.S. CITIZEN/RESIDENT ALIEN	Ň	HOME				
OTHER (IF YOU CHECKED "OTHER" PROVIDE C	OUNTRY OF CITIZENSHIP)	OTHER		-		
		11. E-MAIL				
If a person wins a prize of \$250,000 or more, O.C.G.A. \$50-27-25(d) authorizes that person to keep that prize anonymous. Do you wish to remain anonymous for your winning of this prize of \$250,000 or more? Yes No						
12. U.S. SOCIAL SECURITY NUMBER OR TAX	IDENTIFICATION NUMBER	-		7		
In making this claim and under penalties of perjury, I certify to the best of my knowledge and belief that a) the U.S. Social Security Number or Tax Identification number shown on this form is correct, b) I am not subject to backup withholding due to failure to report interest and dividend income, c) all other above informa- tion is true and correct, and identifies me as the recipient of this claimed prize, and d) that I am not prohibited by Georgia Law from purchasing a Lottery ticket.						
The Internal Revenue Service does not require yo	ur consent to any provision of this do	cument other than	the certifications required to a	avoid backup withholding.		
13. CLAIMANT SIGNATURE			DATE			
	FOR LOTTERY U	ISE ONL	Y:			
	RECEIVED BY (Signature)	IDENTIEL	CATION	16. DATE		
17. TYPE OF I.D. NUMBER	ТҮ	TPE OF I.D. JMBER				
18. INSTANT TICKET NUMBER (on back of ticket above the bar code) 19. INSTANT TICKET VALIDATION NUMBER (covered number on the lower play area)						
20. ON-LINE TICKET SERIAL NUMBER (on the bottom front of the on-line ticket)						
21. Processed By:	Date:	22. Prize Amour	nt: \$ 23. Chec	ckAmount: \$		
24. Check No: Received By: Date:						
White Copy - Georgia Lottery	Canary Copy - Claimant Copy	Claimant Signature		Substitute Form W-9		

INSTRUCTIONS TO FILE YOUR WINNER CLAIM FORM:

You may claim prizes of any amount at any of the Georgia Lottery Offices listed below. Complete steps 1 through 4 below to personally file your claim at any of our offices. Office Hours are 8:30 a.m. to 5:00 p.m., Monday thru Friday. Please allow one to three hours to process claims valued \$5,000 to \$499,999.00. Prizes of \$601 to \$249,999 claimed at GLC headquarters or district offices are paid the same day. Winners claiming prizes of \$250,000 to \$499,999 should plan to arrive at GLC headquarters or district offices by 4 p.m. for sameday payment; winners who arrive after 4 p.m. will be paid the following business day. The payment of prizes of \$500,000.00 or more shall be made on a date subsequent to the date of the prize claim submission. Federal and State Income Tax Withholding will be deducted from prizes exceeding \$5,000. Child Support Services debts in excess of \$100.00 will be deducted from prizes \$2,500.00 or more, net of wager or ticket cost. Other outstanding State debts in excess of \$100.00 (e.g. Department of Education and Department of Revenue debts) will be deducted from prizes \$5,000.00 or more, net of wager or ticket cost. You may also claim your prize through the mail by completing steps 1 through 5 below.

- 1.) Complete and sign the back of the ticket. The ticket must be completed in the name of one individual or legal entity (i.e., Corporation, Partnership, etc.)
- 2.) Complete the Claimant Section of the Winner Claim Form (1 through 13). The Winner Claim Form must be completed in the name of one individual or legal entity. The name and tax identification number must match the name and tax identification number used with the Internal Revenue Service.
- 3.) After reading the printed statement, sign and date the Winner Claim Form in the spaces provided. If you are signing as a representative of a legal entity, provide your title.
- 4.) For Claims over \$600.00, you will need to present two forms of identification to verify your name, signature and social security number, **preferably a Driver's License and Social Security Card**. **The combined forms of I.D. must verify your name, signature and social security number**. The following is a list acceptable forms of identification:

Driver's License	Social Security Card
Passport	Identification Card issued by another State
U.S. Resident Alien Card	U.S. Armed Forces Identification

Georgia Identification Card U.S. Student Identification Card

5.) If you would like to file your claim by mail, please mail the completed Winner Claim Form, original ticket and copies of two forms of identification to:

Georgia Lottery Corporation P.O. Box 56966 Atlanta, GA 30343

Retain a copy of the completed Winner Claim for your records.

GEORGIA LOTTERY OFFICES

Atlanta	Dalton	Macon
250 Williams Street	Market Street Shops of Dalton	1693 Bass Road
Atlanta, Georgia 30303	1001 Market Street	Macon, Georgia 31210
(404) 215-5000	Suite 21	(478) 784-5420
	Dalton, GA 30720	
Augusta	(706) 278-3088	Savannah
Village at Hereford	Duluth	Lawrel Hill Village
5155 Columbia Road	1680 Executive Drive South	101 Little Neck Road
Suite 103	Suite 800	Hwy 19 South
Grovetown, GA 30813	Duluth, Georgia 30096	Savannah, Georgia 31419
(706) 737-1320	(770) 923-0220	(912) 920-5100
Columbus	Hartsfield-Jackson Atlanta International Airport	Tifton
The Landings at Airport Thruway	North & South Baggage Claim	2406 Tift Avenue North
2517 Airport Thruway	(Claim up to \$25,000 - call for extended hours) Suite 101	
Columbus, Georgia 31904	Atlanta, Georgia 30320	Tifton, Georgia 31794
(706) 660-2380	(404) 762-8842	(229) 382-2430

For more information visit our website at www.galottery.com or call: 1-800-GALUCKY (1-800-425-8259)