

## **FILING A CLAIM FOR A MICHIGAN LOTTERY PRIZE**

The Michigan Lottery will deduct from prize payments of \$1,000 or greater any outstanding debts collectable by the State of Michigan, in accordance with state law.

Once a claim is presented for payment it becomes the property of the State of Michigan and cannot be returned. If you do not own the ticket you are claiming,

### **STOP HERE**

To file a claim for a Michigan Lottery prize:

- 1. Sign and submit the lottery ticket.**
- 2. Complete and sign the Ticket Receipt Form.**
- 3. Provide valid (not expired) picture identification.**
- 4. Provide your social security card.**

Michigan Lottery prizes are subject to federal, state, and local income taxes. You may be required to make estimated tax payments by filing a form 1040ES with the Internal Revenue Service. If you have any questions regarding income tax, please contact the Internal Revenue Service at (800) 829-1040, the Michigan Department of Treasury at (517) 636-4486, or your local taxing authority.

Club representatives claiming a prize on behalf of a club must complete a substitute 5754 form in place of the attached Ticket Receipt Form. A substitute 5754 form is available at [www.michiganlottery.com](http://www.michiganlottery.com); click how to claim prizes. Or by contacting any one of Lottery's claim centers or Public Relations department at 517-373-1237.

All claimed prizes of greater than \$600 will receive a W-2G at time of prize payment.

In case of lost W-2G form, call 517-373-6001 and a duplicate W-2G form will be mailed to the address provided at time of prize payment.



MICHIGAN LOTTERY
TICKET RECEIPT FORM
(Not to be used for Lottery club claims)

REGION AND CLAIM ID NUMBER

LOTFUL Authorization #

IS CLAIMANT A U.S. RESIDENT? YES NO IF NO - COUNTRY OF RESIDENCE:

CLAIMANT'S LEGAL FIRST NAME MI LAST NAME SUFFIX

SOCIAL SECURITY NUMBER\* DATE OF BIRTH MONTH DAY YEAR

MAILING ADDRESS (leave a space between number and street name)

CITY STATE ZIP CODE

AREA CODE PRIMARY CONTACT PHONE NO. AREA CODE SECONDARY CONTACT PHONE NO. PRIZE AMOUNT

EMAIL ADDRESS

PAYMENT METHOD PAY BY CHECK PAY TO BOA PREPAID CARD

Are you the original purchaser of the ticket being claimed? YES NO If No, please explain:

DRAW GAME WAGER # COPY BOTTOM OF TICKET EXACTLY

INSTANT TICKET GAME # PACK # TICKET # VALIDATION #

PULL TAB GAME # PACK # TICKET # VALIDATION #

ALTERING TICKETS SUBJECT TO 5 YEARS IN PRISON

I am the true owner of the Lottery ticket being claimed today. Under penalties of perjury, I certify that:
1. The number shown on this form is my correct taxpayer identification number...
2. I am not subject to backup withholding because...
3. I am a U.S. person (including a U.S. resident alien).
4. I am exempt from FATCA reporting.
The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.
Claimant's Signature Date / Time
Reissue Ticket(s) Received By Date

LOTTERY USE ONLY
CLAIM RECEIVED BY: SIGNATURE
DATE / TIME:
PRIZE AMOUNT \$
OTHER WITHHOLDING \$
CLAIM AUTHORIZED BY: SIGNATURE
DATE / TIME: