## MASSACHUSETTS STATE LOTTERY COMMISSION CLAIM FORM





Supporting the 351 Cities and Towns of Massachusetts www.masslottery.com



MASSACHUSETTS STATE LOTTERY

Braintree, MA 02185-9036 Telephone: 781-849-5555

INSTRUCTIONS
(This Form is for ALL Lottery Tickets)

## Complete the Claim Form by following these steps:

- Carefully print either the 20-digit serial number or the 12digit instant ticket number in the space provided. Complete the remainder of the Claim Form by printing your name, address, social security number, telephone number and, optionally, your e-mail address.
- Sign the Claim Form and your ticket. Separate the Lottery copy from your receipt copy. Put the Lottery copy of the Claim Form and your ticket into the envelope provided and take it to the nearest Lottery office or mail to Lottery Headquarters.
- Proof of positive identification is required for all claims of more than \$600.00; Photo ID & Proof of Social Security Number.

KEEP A COPY OF THIS CLAIM FORM.
IT IS YOUR RECEIPT. ALSO KEEP A COPY OF THE
FRONT AND BACK OF YOUR TICKET BEFORE
MAILING.

It is further recommended (but not required) that claims be sent by certified or registered mail. The Lottery is not responsible for lost mail.

Winners agree to abide by Massachusetts State Lottery Rules. The risk of mailing tickets rests with the claimant.

Treasurer o	and Receiver General	
	ON LINE TICKET SERIAL NUMBER	
	INSTANT GAME TICKET IDENTIFICATION	PREFIX BOOK NUMBER TICKET NO.
e steps:	PLEASE PRINT CAREFULLY	
or the 12- d. Complete our name,	WINNER'S NAME (First, Middle Initial, Last)	
mber and,	MAILING ADDRESS	
the Lottery		
py of the provided and ottery	CITY	STATE ZIP CODE
I claims of Security		
	E-Mail Address:	
OF THE RE		
	Agent's Signature	Player's Signature (Substitute W-9) Date
at claims be is not	Agent Signature certifies that the above named person is making a claim on enclosed ticket.	"I certify, under penalties of perjury, that the information contained herein is true and accurate. I further declare under the penalties of perjury: that I am 18 years or older; that the name, address and taxpayer identifying number identify me as the sole recipient of this payment; and that I am not
	FOR LOTTERY USE ONLY	claiming this prize to assist another in the avoidance of financial obligations."
	PHOTO ID	CHECK #
ottery Rules.	SSN ID	AMOUNT
	CLAIM ID	INITIALS