

## **Winner Claim Form**

Redeem at claim center (see nelottery.com for claim center locations) or mail (see mailing checklist below).

Prize Being Claimed	Last Name		First Name		Middle Initial	
\$						
Mailing Address						
City		State		Zip Code		
Oity		Otate		Zip Gode		
Home or Cell Phone	Work Phone	Birth Date	nonth day year	ID Number (choose	one)	
( )	( )		nonth day year / /	Driver License	Number	
Social Security Number	Email Address			state	number	
					)	
Are You a United States Legal Resident?			At Which Retail Location Did You Buy Your Ticket?			
YES NO If No, State Your Country Of Residency:						
Are You the Owner of a Lottery Retailer or Employed at a Lottery Retail Location?			Are You Related to the Owner of a Lottery Retailer?			
YES NO If Yes, Name of Retailer:			YES NO If Yes, Name of Retailer:			
How often do you play Nebraska Lottery games? Scratch Lotto			Are you interested in appearing in Lottery advertising?			
every week			Saying "yes" today does not bind you to participation; you are simply			
1- 3 times every three months			agreeing to be on our contact list. Remember, people like to hear about winners. Your name, hometown and prize amount are public			
infrequently (once every 6-12 months)			information and may be used in various ways, regardless of whether or not you appear in advertising.			
<ul> <li>✔ Print your name and add</li> <li>✔ Sign your name on back</li> <li>✔ Complete all items on the</li> <li>✔ Sign and date this form.</li> <li>✔ Disclosure of social secu</li> </ul>	By initialing the box below I grant the hecklist Before Mailing Yourses on back of ticket(s). For ticket(s), is form.  By initialing the box below I grant the health of t	ur Claim above \$500 Prize Clain	TForm. (For Assistant Form.) Form. (For Assistant Form.) For State of the Property of the Prop	ance Call 800-5	tate income tax.	
	FOR NEBRA	SKA LOTT	ERY USE ONLY			
Retailer Number	Prize	C	Claim Center Location:	Process	ed By:	
Game		V	Varrant Number:		Date	
Notes		Λ	Misc. Approval	Ву	Date	
				-,		
Scratch Ticket Scratch VIRN			eason For Misc. Approval:  Damaged Ticket  Other  TTACH TICKET AND WARRAN		er (No) -	

## SUPPLEMENTAL INFORMATION FOR LOTTERY USE (THIS INFORMATION TO BE PUBLICIZED ONLY BY PERMISSION OF THE CLAIMANT)

How did you find out you had won?					
What was your reaction?					
What are your plans for the prize?					
Do you always buy your tickets at the same store?					
Did you keep the ticket in a special place?					
Have you ever won before?					
Do you know anyone benefitting from grants funded by the Lottery?					
Spouse's Name:					
Occupation:					
Other notes:					