

## CLAIMANT SECTION -- PLEASE PRINT CLEARLY!

The information requested on a claim form will be used to validate and process the claim in accordance with Ohio Lottery Commission Rules and Regulations and the Ohio Revised Code and to comply with tax reporting regulations. Failure to provide the information requested will delay the processing of your claim. The information on this claim may also constitute a public record pursuant to ORC 149.43.

## INSTRUCTIONS:

Sign your name and print your name on the back of the ticket. Complete items 1 through 8. Sign the affidavit for child/spousal support and correct information certifications before a Notary Public. Have the claim form signed and notarized. Be sure to include the original ticket and Pay-to-Bearer or File Claim Form Receipt. Keep a copy of all documentation of this claim for your records. SEE BACK FOR MORE DETAILS.
1.
2.

ADDRESS (CANNOT USE P.O. BOX)
3.

## CITY

6. 

SOCIAL SECURITY NUMBER

- $\qquad$

7. ( $\left(\frac{1}{\text { DAYTIME AREA }}\right.$ ) 1 -
$\square$
8. 

$\overline{\text { STATE }}$
5.

## ZIP CODE

8. 


(RETAILER NUMBER)
Under penalty of perjury, I certify that all information provided on this form is true and correct to the best of my knowledge. I further state under oath and certify the following:

1. I am / am not (circle one) in default of any court order requiring me to pay child support or alimony. Please see ORC §3770.071.
2. My personal information including Social Security Number provided herein are correct.

I understand that my name, address, telephone and/or likeness may be utilized for administrative, marketing and/or promotional purposes.

## NOTARIZE ONLY IF PRIZE AMOUNT IS MORE THAN \$599

STATE OF: $\qquad$ COUNTY: $\qquad$
SWORN TO ME AND SUBSCRIBED IN MY PRESENCE, THIS $\qquad$ DAY OF $\qquad$ 20 $\qquad$
NOTARY PUBLIC $\qquad$ My Commission Expires $\qquad$
BANK / LOTTERY USE ONLY

## RETAILER CLAIM PROCESSING INFORMATION

## AFTER VALIDATING AN ORIGINAL TICKET THAT PRODUCES A PAY TO BEARER OR FILE CLAIM RECEIPT, ATTACH THE RECEIPT AND ORIGINAL TICKET TO THE CLAIM FORM AND GIVE ALL DOCUMENTS TO THE CLAIMANT.

## RECEIPT TYPES AND PAYMENT OPTIONS

- A Cash/Pay receipt is generated when the prize amount is the responsibility of the retail agent.
- A Pay to Bearer receipt is generated when the prize amount is between $\$ 600$ and $\$ 5,000$. Payment options are bank cashing or check processing.
- A File Claim Form receipt is generated when the prize amount is over $\$ 5,000$. Prize winners must follow the check payment procedures below. If the prize is a jackpot or an annuity prize (i.e., $\$ 100,000$ per year for 20 years), call your nearest Ohio Lottery Regoinal Office to make an appointment to submit the claim.


## I. BANK CASHING METHOD OF PAYMENT

Requires a completed and notarized claim form, with the Pay to Bearer and the original ticket to an authorized bank cashing location to obtain same day payment. The Bank will charge a processing fee. Proper identification is required. A valid photo identification (i.e. driver's license) containing the ticket holder's social security number and current address OR valid photo identification containing current address and the ticket holder's social security card will fulfill this requirement.

## BANK CASHING PROCEDURES

1. Claimant signs the original bet ticket and presents it to the retail agent for validation.
2. Retail agent will validate the original ticket.
3. Retail agent will give the claimant the Pay to the Bearer AND the original ticket (Or staple both documents to the claim form).
4. Claimant must complete the affidavit section of the claim form and have the claim form notarized.
5. The claimant will present all documents to an authorized bank cashing location.

## II. CHECK PAYMENT METHOD

Check will be processed within 30 business days, free of charge; unless circumstances such as payment of child support or State debt require additional processing time. This payment method is optional for prize amounts between $\$ 600$ and $\$ 5,000$ and is required for any prize amount over \$5,000.

## CHECK PAYMENT INSTRUCTIONS

1. Claimant will present a signed original bet ticket to a lottery retailer for validation
2. Retail agent will give the claimant the Pay to Bearer/File Claim Form receipt, AND the original ticket.
3. Claimant will sign the Pay to Bearer/File Claim Form Receipt.
4. The affidavit for Child/Spousal Support must be completed, signed, and notarized. (Regardless of state/county residence).
5. Mail the claim form, original ticket, and receipt (s) registered or certified to:

Ohio Lottery Commission - Room 452
615 W Superior Ave
Cleveland, Ohio 44113-1879
If you send by mail, keep a copy of the claim form, original ticket, and receipts for your records.

## THE OHIO LOTTERY IS NOT RESPONSIBLE FOR LOST MAIL

Claimant may also validate the ticket and complete claim form at any of the Ohio Lottery's Regional Offices

| OHIO LOTTERY <br> REGIONAL | Toledo | Cincinnati | Athens | Youngstown |
| :--- | :--- | :--- | :--- | :--- |
| OFFICES: | 315 Arco Drive | 10840 Kenwood Rd | 170 W. Union Street | 242 Federal Plaza West |
|  | Toledo, 43607 | Cincinnati, 45242 | Athens, 45701 | Youngstown 44503 |
|  | 1-800-589-6442 | $1-800-589-9882$ | $1-800-589-6466$ | 1-800-589-6468 |
| Cleveland | Dayton | Columbus | Alkron-Canton | Lorain |
| 1100 Resource Drive | 7462 Webster St | 780 Morrison Road | 5926 Mayfair Road | 300 W. Erie \& Broadway |
| Brooklyn Hts., 44131 | Dayton, 45414 | Columbus, 43230 | North Canton, 44720 | Lorain, 44052 |
| $216-774-5671$ | $1-800-589-6463$ | $1-800-589-6445$ | $1-800-589-6467$ | 1-800-589-6469 |

