

Use this form when claiming a winning ticket through the mail or in person at the Lottery.
Do not use this form for prizes paid by retailers

INSTRUCTIONS TO WINNER

CLAIMING BY MAIL: Sign the back of the ticket. Please read the information on the back of this form. Fill out the form completely.

Mail white copy of the completed form and the original winning ticket for processing to:

Oregon Lottery **Registered Mail**
PO Box 14515 **Recommended**
Salem, OR 97309

All mailed claims are processed in Salem. **Keep yellow copy of this form for your records.**

CLAIMING IN PERSON: All winning tickets may be claimed at:

500 Airport Rd. SE **Take I-5 to exit 253**
Salem, OR 97301 **and follow Lottery signs**

Winning tickets under \$50,000 may also be claimed at:

9760 SW Wilsonville Rd. **Take I-5 to exit 283**
Wilsonville, OR 97070 **then follow SW Wilsonville Rd. to SW Kinsman Rd.**



OREGON LOTTERY™

Together, we do good things.

WINNER CLAIM FORM

For prizes paid directly by the Oregon Lottery®

WINNER INFORMATION

CLAIM NUMBER

1. Legal Name															2. Gender							
FULL LEGAL NAME LAST Name(s)															M		F					
3. Address																						
4. City															5. State		6. Zip					
7. SSN ITIN															8. Birth Date		9. Phone					
															Month		Day		Year		Daytime# Including Area Code	
10. U.S. Citizen			YES		NO		11. Driver's License/Passport/ID #								State Issued							
12. Prize Claimed			\$		13. Do you have any other tickets identical to this one for the same game and draw? (see explanation on back)								YES		NO		N/A					

14. Winner Declaration

Under penalty of law, I declare that the name, address, and taxpayer identification number which I have furnished, correctly identify me as the recipient and rightful owner of the prize claimed, and that the ticket attached to this claim has not been falsely made, altered, forged, or counterfeited.

I am not the spouse, child, brother, sister, or parent of any member of the Lottery Commission, the Director, the Assistant Directors, or any employee of the Oregon Lottery.

I have read and understand the information on the front and back of this form.

Claimant's Signature _____ Date ____/____/____

Email _____

Any person who, with intent to defraud, falsely makes, alters, forges, or counterfeits a state lottery ticket is guilty of a class C felony punishable by up to 5 years in prison and a fine of \$125,000. ORS 165.013, 161.605, 161.625.

FOR LOTTERY USE ONLY

Verified Prize Amount: _____

of Tickets/Type: _____

Security Review: _____

Payment ID/Initials: _____

Check #: _____

Received by: _____ Date: ____/____/____

Issued by: _____ Date: ____/____/____

MAIL
WALK-IN

CLAIM NUMBER

This form is for winning tickets claimed by mail or in person at the Oregon Lottery®.

- Item 1 The Lottery can only pay a prize to a “natural person(s)” - do not list the name of a business, club, or organization. Enter your full legal name. Legal name is the name which an individual is given at birth or which appears on their birth certificate or marriage certificate.
- Items 3 - 6 Mailing address.
- Item 7 Enter your Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN).*
- For Video LotterySM Jackpot prizes, the Lottery must report all Jackpot prizes of \$1200 or more to the Internal Revenue Service. The Lottery must report all Jackpot prizes to the Oregon Department of Revenue, and withhold state income taxes in accordance with state and federal law.
- For all other Lottery games, the Lottery must report all prizes of \$600 or more to the Internal Revenue Service and the Oregon Department of Revenue, and withhold state and federal income taxes in accordance with state and federal law.
- Item 8 Enter the month/day/year you were born.
- Item 9 Please provide your daytime telephone number.
- Item 11 Enter your driver’s license number and state issued, passport number, or ID number.
- Item 12 Enter prize amount, if known. Prize amount will be verified by Lottery.
- Item 13 If more than one ticket for a game (i.e., MegabucksSM, Powerball[®], etc.) was purchased for the same drawing (i.e., same date and time) and has the same numbers selected, all winnings must be added together for the purpose of federal tax reporting and withholding requirements. The requirement applies if the total amount of winnings from the identical tickets is greater than \$5,000.
- Item 14 Read, sign and date this item. This form will not be accepted without an original signature.

*Disclosure Requirement: Each United States resident who is to receive a payment of winnings greater than \$600 shall furnish to the Lottery the information required on the Internal Revenue Service Form W-2G (or any other form required by the IRS), including but not limited to the winner’s name, address, and social security number. This disclosure is mandatory and the authority for such disclosure is 42 USC 405(c)(2)(C), 26 CFR 31.3402 (q)-1(e), and ORS 461. A winner’s social security number will be used for the purpose of identifying child support obligors, identifying persons that have received an overpayment of assistance for which the Department of Human Services or the Oregon Health Authority has issued a final order for overpayment under ORS chapter 183, and submitting required documents to state and federal tax authorities.

INFORMATION ON PRIZE PAYMENT:

If you do not receive your prize or have not been contacted by the Lottery within two weeks, please contact the Player Services Department at 503-540-1050, Monday through Friday, 8 a.m. to 5 p.m.

PUBLIC INFORMATION

In accordance with Oregon Public Records Law, once a prize has been validated, the following facts are public information and may be subject to public records disclosure:

- Winner’s name, city, state and zip code
- Game in which prize was won
- Date of game drawing
- Date prize was claimed
- Amount of prize won
- Retail location/city in which winning ticket was sold

CONGRATULATIONS AND THANK YOU FOR PLAYING THE OREGON LOTTERY!