



# Missouri Lottery Winner Claim Form

Official Missouri Lottery Claim Form

**A PLEASE PRINT** your name, address and phone number on the back of your ticket - **YOU MUST SIGN YOUR TICKET.** Any winning Missouri Lottery ticket worth \$600 or less can be cashed at a licensed Lottery retailer selling that game, regardless of where the ticket was purchased and provided the cash is available.

**B COMPLETE ITEMS 1-15 BELOW.** Please use this form to claim INSTANT (Scratchers) or NUMBERS GAME prizes. Complete item 13 or 14 according to the type of game prize you are claiming.

**C RETAIN A PHOTOCOPY** of the front and back of your winning ticket and of this completed form for your personal records. Staple the ticket to the top right corner of this form. Mail this form and the winning ticket to: MISSOURI LOTTERY, PO BOX 7777, JEFFERSON CITY, MO 65102-7777, OR hand deliver your ticket and completed claim form to any Missouri Lottery office.

1. Last Name  2. First Name  3. M.I.  4. Date of Birth --  
MM DD YY

5. Mailing Address [Street, Route or PO Box#]  6. City  7. State

8. Zip Code  9. SSN# / FIN# -- 10. Phone --  
[area code] 11. U.S. Resident  Y or N

12. Amount of Prize [before taxes] \$  .00  
 13. Scratchers (instant ticket) information  
 Number on **BACK** of ticket ---  
Exact 14-digit number that appears on ticket.  
 Number on **FRONT** of ticket   
Exact 12-digit number that appears on ticket.

14. Numbers-Game ticket information  
 Numbers Played  Quick Pick?  Yes  No  
Separate numbers with hyphens.  
 Number on **FRONT** of ticket --  
Exact 18-digit number that appears on the ticket.

15. Under penalty of perjury, I declare that the name, address and Social Security number, which I have furnished, correctly identifies me as the recipient of the prize claimed, and that the ticket attached to this form has not been falsely made, altered, forged or counterfeited.

Claimant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**In addition to the claim form, it is your responsibility to complete IRS Form W-9 - Request for Taxpayer Identification Number and Certification for any taxable winnings over \$600.**

**LOTTERY USE ONLY**

Numbers-Game Tickets:  < 90 days  Group Win  Claim Date: \_\_\_\_\_  
(For \$5,000 or more)  > 90 days (indicates more than one check written)

Received By: \_\_\_\_\_ Check #: \_\_\_\_\_ Retailer ID#: \_\_\_\_\_

REGION:  Midstate/Jefferson City  Kansas City  Midstate/Springfield  St. Louis