



PLAYERS CLUB WINNER INSTRUCTIONS/CLAIM FORM

1. Fill out all required fields and sign the form.
2. Attach a photo of the front and back of a valid government-issued photo ID.
3. Securely submit the completed form and attached government-issued ID to the email address provided originally. You can also drop off the form and a copy of your government-issued ID at any of the following **Arizona Lottery** locations:

Phoenix Office - 4740 E. University Dr., Phoenix, AZ 85034

Tucson Office - 2955 E. Grant Rd., Tucson, AZ 85716

Kingman Office - 3396 Stockton Hill Rd., Kingman, AZ 86409

4. Questions? Contact us at 480-921-4400 or visit ArizonaLottery.com

Last Name _____ First Name _____ M.I. _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ SSN/TIN _____ Date of Birth _____

U.S. CITIZEN RESIDENT ALIEN NON-RESIDENT Email _____

Prize Amount \$ _____

PLEASE INDICATE YOUR PREFERRED METHOD FOR CHECK DELIVERY:

Send the prize to me via U.S.P.S. using the address I provide on the claim form.

I would like to pick up the prize in person.

- IF YOU SELECTED PICK UP, PLEASE INDICATE WHICH ARIZONA LOTTERY OFFICE LOCATION:

Phoenix (4740 E. University Dr., Phoenix, AZ 85034)

Tucson (2955 E. Grant Rd., Tucson, AZ 85716)

Kingman (3396 Stockton Hill Rd., Kingman, AZ 86409)

Under penalty of perjury, I certify and declare by my signature below that:

- I am at least 21 years of age;
- I understand that, under A.R.S. § 5-566, a person who, with intent to defraud, falsely makes, alters, forges or counterfeits a state Lottery ticket will be charged with a class 3 felony;
- Pursuant to A.R.S. § 5-567, I am not a prohibited player;
- (For winners of prizes of \$100,000 or more) I understand that, under A.R.S. § 5-573(D), I have the right to elect for permanent confidentiality. I understand that if I do not elect for permanent confidentiality, my name will be a public record and may be released, upon a public record request or court order, 90 days from the date my prize is awarded;
- I understand that, under A.R.S. § 5-573(C), my prize information will be reported by my social security number to the Arizona Department of Economic Security and that my prize may be used to offset any child support or State of Arizona debt owed by me; and
- I understand that my taxpayer ID must be provided for tax reporting purposes under 26 U.S.C. § 6109; and I have provided my correct name, address and taxpayer ID number, as the recipient of this prize.

Claimant's Signature: _____ Date _____