

# **WINNER CLAIM FORM - ENTITY**

Privacy Act Notice and Instructions are on the back of this Form For more information, visit our website at flalottery.com

PLEASE COMPLETE
IN PEN AND SUBMIT
A COPY OF YOUR

							-	IDENTIFICATION										
ENTITY - COMPLETE THIS SECTION									DENTIFICATION									
1. CLAIMANT TYPE: CORPORATION PARTNERSHIP TRUST ESTATE NON-PROFIT																		
LIST NAME OF ENTITY HERE:																		
E N T I T Y  ENTITY																		
2. U.S. SOCIAL SECURITY NUM	MBER OR T	_		NTIFIC	ATIO	N N	UMBER	2		_								
3. TELEPHONE 4. EMAIL																		
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SECONDARY #	]-[																	
5. MAILING ADDRESS				Ш						$\perp$					$\perp$	$\perp$		
6. APT/UNIT #		7. CI	TY									I				I		
8. STATE	9. ZIP C	ODE				]-[												
10. COUNTY				П	(E)	K. ALA	ACHUA,	BROV	VARD	, CAL	AUOH	I, ETC	C.)					
I understand that any person who knowingly presents a counterfeit or altered lottery ticket; or who, with intent to defraud, falsely makes, alters, forges, passes or counterfeits a lottery ticket; or who knowingly files a claim based on facts that are untrue, is in violation of Section 24.118(3), Florida Statutes, and is guilty of a felony of the third degree.																		
<ul> <li>Under penalty of perjury, I certify that all information provided on this form is true and correct and that: (check all boxes below that apply)</li> <li>I am the rightful owner or the duly authorized representative of the rightful owner of the winning ticket submitted with this form.</li> <li>I am 18 years of age or older.</li> <li>The entity listed above is not subject to backup withholding of federal taxes.</li> </ul>																		
12. CLAIMANT SIGNATURE											7 d	ATE	Г					
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TITLE																		
		F	OR LO	OTTE	RY	USE	ON	LY:										
LOTTERY OFFICE		RECEIVE	ED BY								DAT	Е						
ID TYPE/NUMBER		-									CLA	IM NI	JMBEF	?				
TICKET SERIAL NUMBER/VIRN																		

FORM DOL 173-2E REVISED 2/2023



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### **ENTITY - COMPLETE THIS SECTION**

1. CLAIMANT TYPE: CORPORATION PARTNERSHIP TRUST ESTATE NON-PROFIT									
LIST NAME OF ENTITY HERE:									
E N T I T Y ENTITY									
2. U.S. SOCIAL SECURITY NUMBER OR TAXPAYER IDENTIFICATION NUMBER									
	OR								
3. TELEPHONE 4. EMAIL									
PRIMARY #	-		@						
SECONDARY #									
5. MAILING ADDRESS									
6. APT/UNIT #	7. CITY								
8. STATE 9. ZIP C	ODE	-							
10. COUNTY	(E	X. ALACHUA, BROWARD, CALH	OUN, ETC.)						
I understand that any person who knowingly presents a lottery ticket; or who knowingly files a claim based on f	counterfeit or altered lottery ticket acts that are untrue, is in violation	; or who, with intent to defraud, fals of Section 24.118(3), Florida Statu	sely makes, alters, forges, passes or outes, and is guilty of a felony of the th	counterfeits a nird degree.					
11. CERTIFICATION  Under penalty of perjury, I certify that all information  I am the rightful owner or the duly authorized  I am 18 years of age or older.  The entity listed above is not subject to backup	ed representative of the rightful	owner of the winning ticket subn	mitted with this form.	ederal taxes.					
12. CLAIMANT SIGNATURE			DATE						
TITLE			]						
			-						
OTTEDV OFFICE	FOR LOTTERY RECEIVED BY	USE ONLY:	DATE						
OTTERY OFFICE	RECEIVED BY		DATE						
D TYPE/NUMBER			CLAIM NUMBER						
icket serial number/virn									

### PRIVACY ACT NOTICE CLAIMANTS OF TICKETS VALUED AT \$600 OR MORE

Under the Federal Privacy Act, disclosure of a person's Social Security number is voluntary unless a Federal statute specifically requires such disclosure or allows states to collect the number. For claimants of winning lottery tickets valued at \$600 or more, disclosure is required by 26 U.S.C. s. 3402 and 26 U.S.C. s. 6109 for tax withholding and reporting purposes. The Lottery may also provide this information to law enforcement agencies to enforce criminal laws.

Under Section 119.071(5), Florida Statutes, an agency may collect Social Security numbers if it is imperative for the performance of the agency's duties and responsibilities. Notice is hereby provided that it is imperative that the Lottery collect the Social Security number of a claimant of a ticket valued at \$600 or more to determine whether the claimant owes an outstanding debt to a state agency or child support collected through a court, pursuant to Section 24.115, Florida Statutes, and for tickets valued at \$3,500 or more, to aid in determining eligibility or continued eligibility for state public assistance program(s), pursuant to Federal Regulation 273.11(r)(2), because the Social Security number is used as an identifier in the databases searched.

For claimants of winning lottery tickets valued at \$250,000 or more, the name of a winner of a prize is confidential and exempt from disclosure as a public record pursuant to Section 119.07 (1), Florida Statutes, and Section 24(a), Article 1 of the State Constitution for 90 days from the date the prize is claimed, unless the winner consents to the release of his or her name or as provided for in Section 24.115 (4), Florida Statutes, or Section 409.2577, Florida Statutes. After 90 days, the winner's name is no longer confidential and exempt.

#### TAX AND STATE-OWED DEBT INFORMATION

For tickets valued above \$5,000, federal income tax will be withheld. For tickets valued at \$600 or more, certain debts, including, but not limited to, those owed to a state agency and unpaid child support collected through a court will be deducted.

#### **INSTRUCTIONS FOR CLAIMING YOUR PRIZE**

COMPLETE THE BACK OF THE TICKET. PRINT THE NAME OF THE ENTITY ON THE BACK; PLACE YOUR NAME UNDER THE ENTITY NAME WITH YOUR TITLE. Payment will be made to the entity whose name appears on the back of the ticket.

#### **CARING FOR YOUR TICKET:**

- 1. Store your ticket in a safe place until you are ready to redeem it. Do not expose your ticket to extreme sunlight or heat.
- 2. Do not laminate your ticket.
- 3. Do not expose your ticket to fatty substances such as oil, butter, or milk.
- 4. Water will affect a ticket if it is submerged for a prolonged period of time.
- 5. Do not alter any info, write over, erase or use white out on your ticket. Any modifications to the ticket will be reviewed and delay payment of claim.

#### **CLAIM OPTIONS:**

Winning tickets must be submitted by a claimant for validation to claim a prize. Winning tickets may be validated at any Lottery retailer or Lottery office. Ticket value is determined by adding all prizes on a single ticket.

- 1. Retailers: Winning tickets valued at less than \$600 may be redeemed at any Lottery Retailer.
- 2. Lottery district offices and Lottery Headquarters: While winning tickets of any value can be submitted to any Lottery office, certain games and prize amounts can be processed and paid at Lottery district offices while others must be processed through Lottery Headquarters.
  - a. District Offices: For games that do not offer an annual payment option, winning tickets valued at \$600 to \$1,000,000 may be processed and paid at any Lottery office.
  - b. Headquarters: All winning ticket prizes with an annual payment option and winning tickets valued at more than \$1,000,000 must be processed through Lottery Headquarters.
- 3. Mail: Winning tickets of any value may be claimed via mail by submitting the original ticket, the original Winner Claim Form (a Winner Claim Form is only required if the ticket is valued at \$600 or greater) and a copy of acceptable identification (see list below) to:

Florida Lottery, Claims Processing, 250 Marriott Drive, Tallahassee, FL 32399-9939 or to a Lottery district office. See flalottery.com for Lottery district office locations.

Envelopes containing winning Draw game tickets must be postmarked within 180 days after the date of the winning drawing, and envelopes containing winning Instant-win tickets must be postmarked within 60 days after the official end of game. TRACKABLE METHODS OF MAILING ARE RECOMMENDED. THE RISK OF MAILING TICKETS REMAINS WITH THE PLAYER.

#### **COMPLETING THE WINNER CLAIM FORM:**

- 1. Complete Section 1 in the name of one entity. The name and taxpayer identification number used must match the name used with the Internal Revenue Service. If the social security number of the entity representative is used, the representative's name and number must match IRS records.
- 2. After certifying that the information provided is correct, sign and date the Winner Claim Form where provided. List your title with the entity.
- 3. For tickets valued at \$600 or more, a copy of one form of identification must accompany your claim. The ID must be current or issued within the last 5 years and bear a serial or other identifying number.
- 4. Copies of all documents establishing the Entity shall be provided to the Lottery. Review of Entity documents is required by the Lottery's Legal Department; allow for additional time to process your claim.
- 5. "U.S. Person" is defined as (1) an individual who is a U.S. citizen or U.S. resident alien; (2) a business entity organized under the laws of the U.S.; (3) an estate or (4) a domestic trust.

#### **HOW TO CLAIM:**

- 1. To claim a Draw game prize, the claimant must (1) submit the winning ticket for validation at a Lottery office or retailer on or before the 180th day after the winning drawing, and (2) if the prize is not paid at that time, submit the ticket for prize payment at a Lottery office on or before the 210th day after the winning drawing. If the ticket has remaining drawings, a continuation ticket will be issued.
- 2. To claim an Instant-win (Scratch-Off or Fast Play) game prize, the claimant must (1) submit the winning ticket for validation at a Lottery office or retailer on or before the 60th day after the end of game, and (2) if the prize is not paid at that time, submit the ticket for prize payment at a Lottery office on or before the 90th day after the official end of game.
- 3. All required documentation to pay a prize must be received by the Lottery by the 210th or 90th day, respectively, or the prize will be forfeited. Any alteration different than the original submission will be reviewed and delay payment of claim.

### **ACCEPTABLE FORMS OF IDENTIFICATION:**

- 1. A Florida Identification card or driver's license issued by a public agency authorized to issue driver's licenses.
- 2. A driver's license or an identification card issued by a public agency authorized to issue driver's licenses in a state other than Florida, a territory of the United States, or Canada or Mexico.
- 3. A passport issued by the Department of State of the United States.
- 4. A passport issued by a foreign government (prizes that do not require a notarized affidavit).
- 5. A passport issued by a foreign government stamped by the United States Bureau of Citizenship and Immigration Services (for prizes that require a notarized affidavit).
- 6. An identification card issued by any branch of the armed forces of the United States.
- 7. An identification card issued by the United States Bureau of Citizenship & Immigration Services.
- 8. Other proof of identity authorized for use by notaries public in Section 117.05 (5)(b)2., Florida Statutes.

