



# 2nd CHANCE WINNER CLAIM FORM

## PLAYER INFORMATION

LAST NAME: \_\_\_\_\_ SUFFIX: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ M.I.: \_\_\_\_\_  
 ADDRESS 1: \_\_\_\_\_  
 ADDRESS 2: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIPCODE: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_

BIRTH DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_-\_\_\_\_-\_\_\_\_ I DON'T HAVE A SOCIAL SECURITY NUMBER   
 I AM **NOT** A US CITIZEN - or -   
 I AM **NOT** A RESIDENT ALIEN  DAYTIME PHONE NUMBER: (\_\_\_\_) \_\_\_\_\_  
 ARE YOU A LOTTERY RETAILER? YES  NO  ARE YOU EMPLOYED BY A LOTTERY RETAILER? YES  NO  ARE YOU RELATED TO A LOTTERY RETAILER? YES  NO

## PRIZE INFORMATION

PRIZE NAME \_\_\_\_\_ DRAWING NAME \_\_\_\_\_  
 TICKET ID/ ENTRY CODE \_\_\_\_\_ DRAWING ID (IF APPLICABLE) \_\_\_\_\_

## PROVIDING THE FOLLOWING INFORMATION IS VOLUNTARY

WHICH OF THE FOLLOWING DO YOU CONSIDER YOURSELF TO BE	
AFRICAN AMERICAN	
ASIAN	
HISPANIC	
WHITE	
OTHER (specify)	

HOUSEHOLD INCOME (CHECK ONE)	
UNDER \$20,000	
\$20,000 TO \$35,000	
\$35,000 TO \$50,000	
\$50,000 TO \$75,000	
OVER \$75,000	
Number of people in household	

EDUCATION (CHECK ONE)	
DID NOT FINISH HIGH SCHOOL	
HIGH SCHOOL GRAD OR GED	
SOME COLLEGE	
GRADUATED COLLEGE	

SEX (CHECK ONE)	
MALE	
FEMALE	

OCCUPATION (CHECK ALL THAT APPLY)	
STUDENT	
EMPLOYED	
UNEMPLOYED	
RETIRED	

I declare under penalty of perjury and the laws of the state of California included but not limited to California Penal Code sections 118 and 72, that I am the rightful owner of the winning ticket referenced in this form from the California State Lottery, that I am 18 years of age or older and that all information provided is true and correct. I understand that any person who, with intent to defraud, falsely makes, alters, forges or counterfeits a Lottery ticket is a violation of State law and could be liable for criminal penalties.

WINNER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
 (ONLY ONE SIGNATURE IS PERMITTED)

FOR DISTRICT OFFICE USE ONLY			
CLAIMANT ID. CODE	DIST. OFFICE CODE	DATE RECEIVED	POST MARK DATE
		<input type="text"/>	<input type="text"/>
DRAW DATE	INITIALS	CONTROL NUMBER	

FOR HEADQUARTERS USE ONLY		
CODE(S)		
REASON		
RELEASED		
CRN	INITIAL	FINAL



## PLEASE READ ALL INFORMATION AND INSTRUCTIONS BEFORE RETURNING CLAIM FORM

Failure to provide your social security number, date of birth, name and complete address (including apartment or space number), city, state, zip code and phone number may delay or prevent the Lottery from processing our prize claim or result in additional federal taxes being withheld from your prize. Lottery prizes are not subject to California state tax.

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*If you are not a U.S. citizen or resident alien, the Lottery is required by federal tax law to withhold additional taxes from your prize. The Lottery is required to withhold federal taxes of 25% for U.S. citizens and resident aliens providing a social security number, and 28% for U.S. citizens and resident aliens not providing a social security number. Claimants who do not mark the citizenship status will have 30% withheld from all prizes. Federal tax rates are subject to change.*

### **BE SURE TO KEEP A COPY OF THIS FORM**

#### *MAIL THIS CLAIM FORM TO:*

California Lottery  
Attn: 2nd Chance Promotion  
P.O. Box 1317  
Sacramento, CA 95812-1317

### **PRIZE PAYMENT INFORMATION**

Claims submitted to Lottery Headquarters for processing are paid by check from the California State Controller's Office. If you do not receive your prize within six weeks, you may contact the Lottery at 1-800-LOTTERY (568-8379), Monday through Friday, 8:00am to 5:00pm.

The Lottery may make individual prize payments to claimants sharing prizes of \$1,000,000 or more if a Multiple Ownership Claim Form is completed and there are less than 100 claimants for the prize. You may request a Multiple Ownership Claim Form by calling 1-800-LOTTERY (568-8379) or by visiting any Lottery District Office.

### **PRIVACY NOTICE**

The Information Practices Act of 1977 (Cal. Civ. Code §§ 1798-1798.78), the Federal Privacy Act (Public Law 93-579), 5 U.S.C. § 552a, and Cal. Gov. Code §§ 11015.5 and 11019.9, require that this notice be provided when collecting personal information from individuals.

The Player Information requested on this form will be used to validate and process your claim in accordance with the California State Lottery Act of 1984 (Gov. Code 8880 et seq.). The Lottery requires a claimant's social security or tax identification number for tax withholding and reporting purposes, pursuant to Internal Revenue Code sections 6011, 6041, 6109, 3402 and the regulations enacted thereunder.

The Player Information you provide may be disclosed to various state and federal government agencies, including but not limited to: the State Controller's Office, Franchise Tax Board, Health and Welfare Agency and the Internal Revenue Service. The voluntary information that you provide regarding your ethnicity, household income, education, sex, and occupation will only be used by the Lottery to conduct internal demographic studies (which may be completed by agents, contractors, and third-party affiliates). It will not be disclosed to any state or federal government agency or members of the public. You have the right to access your personal information maintained by the Lottery by contacting the California Lottery, 700 North 10th Street, Sacramento, CA 95811-0336 – Attention: Public Records Act Coordinator.

*Purpose and Relevancy of Information Collected:* Information is collected to validate and process a claim and for purposes of sales, marketing, research, security investigation, legal review, surveys and strategic planning as related to the operations of the Lottery. By submitting this claim you consent and agree to such use, and waive claims, whether known now or in the future, related thereto. The California Lottery is subject to public disclosure laws that allow access to certain governmental records. Your full name, the name and location of the retailer who sold you the winning ticket, the date you won and the amount of your winnings, including your gross and net installment payments, are matters of public record and are subject to disclosure. The Lottery will not disclose any other personal or identifying information without your permission unless legally mandated to do so. No information will be collected or accepted from known minors. You may be asked to attend a press conference.

Tickets, transactions, purchases, claims and prize payments are subject to federal and state law and California Lottery regulations, policies and procedures. Copies of regulations are available at Lottery District Offices and on our website at [calottery.com](http://calottery.com). Tickets failing validation are void.