

CLAIM FORM

IMPORTANT TO READ

By my signature, I indemnify The National Prize Draw Limited for any loss which may result if any of the foregoing information is not true and accurate.

Under penalty of perjury, I declare that to the best of my knowledge and belief:

1. The name and address which I have provided, correctly identify me as the recipient of this payment

2. No other person is entitled to claim this prize

3. I am not a person disqualified by law from claiming and/or accepting a prize from a lottery.

4. I am over 18 years of age.

Claimants Signature

Date

SEND TO

The National Prize Draw Limited Post Box 95 Nottingham NG13 8PJ

PLEASE PRINT AND COMPLETE

Print your name, address, phone number on back of ticket

Complete items 1 through to 10 on this form Staple ticket to bottom of form shown below Include a copy of a form of ID (copy of passport, drivers licence, utility bill etc.)

- 1. First Name_____
- 2. Surname _____
- 3. Address
- 4. Town ____
- 5. County_____
- 6. Post Code_____
- 7. Phone No _____
- 8. Birth Date _____
- 9. Prize Claimed \pounds
- 10. Name and Location of Retailer Where Ticket Purchased

