CALIFORNIA LOTTERY

JACKPOT PAYMENT ELECTION



NAME			PHONE NUMBER
ADDRESS			
DRAW DATE	TICKET NUMBER		
You have 60 (sixty) days from the date your claim to choose your payment option. If you do not retu the Lottery will pay your prize in 30 (thirty) annual the same payment option. <u>Each</u> claimant must co in 30 (thirty) annual installments. In accordance we election may not be changed at a later date.	irn a completed ele installments. For n omplete this electio	ction form to to nultiple owner or not to the number of th	the California Lottery within 60 (sixty) days, ship claims, group winners must <u>all</u> choose 60 (sixty) days or <u>all</u> claimants will be paid
CASH OPTION DEADLINE DATE POSTMARKED) BY:		
			ekpot prize will be paid in 30 (thirty) annual each annual payment, in addition to any
	anteed value as e	stablished by	h option, I will receive a single lump sum MEGA Millions Official Game Rules. I s, if applicable.
I have been provided the cash value for my prize choice is irrevocable and I may not change my pathe California Lottery. I hereby waive any time r subject to Lottery rules and regulations.	ayment option after	this election	form has been completed and submitted to
Signature	Date		
Lottery Representative (if applicable)	 Date		
NOTA	RY PUBLIC ACKNO	WLEDGMENT	
State of California		verifies o	public or other officer completing this certificate only the identity of the individual who signed the nt to which this certificate is attached, and not the ess, accuracy, or validity of that document.
County ofOn			nersonally
appeared	vithin instrument and	who proved to acknowledged	o me on the basis of satisfactory evidence to be to me that he/she/they executed the same in
I certify under PENALTY OF PERJURY under the laws	of the State of Califo	rnia that the for	egoing paragraph is true and correct.
WITNESS my hand and official seal.			
			(Seal)