



You're a winner! Thanks for helping fund scholarships!

Check Number: [REDACTED]

Harold Bailey  
[REDACTED]

Date	Amount
02/01/2010	\$8,264,462.78

FEDERAL WITHHOLDING	WF	\$3,038,405.00
STATE WITHHOLDING	WS	\$850,754.00
<b>Total Deductions:</b>		<b>\$3,889,159.00</b>

DOCUMENT IS PRINTED ON CHEMICALLY REACTIVE PAPER - THE BACK OF THIS DOCUMENT INCLUDES A TAMPER EVIDENT CHEMICAL WASH WARNING BOX



Bank of the OZARKS  
17901 Chenal Parkway  
Little Rock, AR 72223

Check No. [REDACTED]

PO Box 3238  
Little Rock AR 72201

DATE: 02/01/2010

AMOUNT  
\$8,264,462.78

Eight Million Two Hundred Sixty-Four Thousand Four Hundred Sixty-Two Dollars And 78 Cents \*\*\*\*\*

PAY TO THE ORDER OF

Harold Bailey  
[REDACTED]

Conway, AR 72034

Void after 120 days



Arkansas  
THE NATURAL STATE

DRIVERS LICENSE



DLN [REDACTED]

BAILEY, HAROLD W.

CONWAY, AR 72034

Issued:	Sex:	Height:	Eyes:
01-27-2010	M	6-04	BZ
Expires:	Endors:	Restr:	
03-07-2014		B	

*Harold W. Bailey*

Birthdate: [REDACTED]

# Arkansas



## Scholarship Lottery

SSN : 

Ticket Number : 409888863432046

Ticket Type : Powerball

Ticket Amount : \$25,000,000.00

DFA Name : No records found  
Amount Due to DFA : \$0.00  
Confirmation Number :

Amount Withheld for DFA : \$0.00

OCSE Name : No records found  
Date of Birth :  
Amount Due to OCSE : \$0.00  
Confirmation Number :

Amount Withheld for OCSE : \$0.00

Total Due to Claimant : \$25,000,000.00

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OCSE  
501-371-5349 or 1-877-731-3071  
Attn: Customer Service  
PO Box 8133  
Little Rock, AR 72203

DFA Tax  
Deborah Wilson  
501-682-7224  
Department of Finance and Administration  
P. O. Box 3628  
Little Rock, AR 72203-3628

COPY



## GRAND PRIZE ELECTION FORM

The undersigned person has been validated as the owner of a winning lottery ticket for the POWERBALL® game validated on

1 / 28 / 10

Kemmel Mazyck

**Instructions to Winner:** You must use this form to choose to receive the Grand Prize in one lump sum (cash option). If you fail to make a selection, you will receive the Grand Prize in 30 payments over 29 years (annuity option). You have 60 days following the date of ticket validation to make this election. You must make this selection before the Lottery can proceed with processing your claim. **TO BECOME EFFECTIVE, THE WINNER MUST ELECT THE CASH OPTION NO LATER THAN 60 DAYS AFTER THE PLAYER BECOMES ENTITLED TO THE GRAND PRIZE (THE DATE OF VALIDATION IS WRITTEN ABOVE). THIS ELECTION IS FINAL AND CANNOT BE REVOKED, WITHDRAWN OR OTHERWISE CHANGED. IT IS RECOMMENDED THAT YOU SEEK PROFESSIONAL ADVICE BEFORE COMPLETING THIS FORM.**

**Limitation of Liability.** Until your election is made or the expiration of the 60-day period, whichever occurs first, the lottery will hold the prize amount in cash. The advertised annuity amount is an estimated amount. The cost of the financial instruments to fund the annuity amount is likely to change with the passage of time. Neither the Multi-State Lottery Association nor the party lotteries shall be responsible or liable for changes in the advertised or estimated annuity prize amount due to changes in the price of qualified securities used to fund the prize.

**The undersigned hereby acknowledges that he/she is responsible for determining the tax liabilities and other financial consequences of the decisions made on this form.**

**DATE AND SIGN ONE OF THE BOXES BELOW TO MAKE THE ELECTION:**

**CASH PAYMENT:** I elect to receive a single cash lump sum as total and complete payment of the POWERBALL® Grand Prize. I understand that this election is irrevocable.

Dated: Jan 28 2010

By:

Print Name: HAROLD BAILEY

Acknowledged by Lottery Official: Ernest L. Parnell

**ANNUITY PAYMENTS:** I elect to receive thirty (30) installments paid over the next 29 years as total and complete payment of the POWERBALL® Grand Prize. I understand this election is irrevocable.

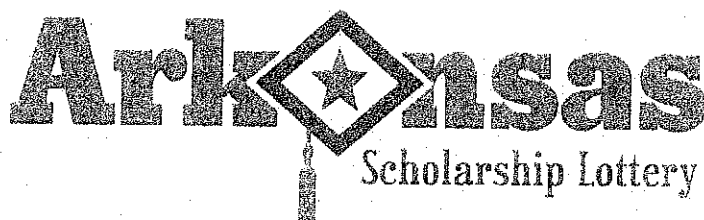
Dated: \_\_\_\_\_

By: \_\_\_\_\_

Print Name: \_\_\_\_\_

Acknowledged by Lottery Official: \_\_\_\_\_

**This form can be used for a Qualified Prize Option — See other side.**



## Claim Checklist (Claims over \$500.00)

- ☒ Ticket (Copy if Powerball over \$5,000.00)
- ☒ Signature (All claims must have signature on the ticket and the claim form)
- ☒ Claim Form
- ☒ Social Security Number or IRS Form 1042-S
- ☒ Copy of Identification
- ☒ Copy of Check
- ☒ Copy of W-2G
- ☐ Taxpayer Identification Number Check
- ☐ W-9 (if necessary)
- ☐ Debt Setoff Form if applicable

**COPY**

## Claim Checklist (Claim under \$500.00)

- ☐ Ticket
- ☐ Signature / Address
- ☐ Copy of Check

**Claimant Signature**

**Claim Associate Signature**

Two handwritten signatures are shown, each written over a horizontal line. The top signature is in cursive and appears to read "Sharon M. B...". The bottom signature is also in cursive and appears to read "Richard J. ...".

# Arkansas Scholarship Lottery (ASL) Winner Claim Form

Claims in excess of \$500 must include a completed Claim Form and a copy of an acceptable form of identification to include: driver's license, U.S. passport, passport issued by a foreign government, U.S. Armed Forces ID, U.S. Bureau of Citizenship and Immigration Services ID, or other proof of identity authorized for use by a notary public in Arkansas.

Prizes up to \$500 may be paid at any ASL Retailer.

Prizes under \$1,000,000 may be paid at any ASL Claim Center or by mail. When submitting a claim by mail:

1. Complete this form entirely.
2. Sign and date this form.
3. Sign and attach the winning ticket(s) to this form.
4. Include copy of an acceptable form of identification.

Mail to:  
Arkansas Scholarship Lottery  
P.O. Box 9838  
Little Rock, AR 72203

THE RISK OF MAILING TICKETS RESTS WITH THE CLAIMANT.

Prizes in excess of \$1,000,000 must be claimed at the Little Rock Area Claim Center.

## Claim Centers:

Little Rock Area Claim Center  
1st Floor-Union Plaza Building  
124 W. Capitol Avenue  
Little Rock, AR 72201

Jonesboro Area Claim Center  
Christian Creek Commons  
2512 Alexander Drive, Suite A  
Jonesboro, AR 72401

Springdale Area Claim Center  
Elmwood Plaza  
3896 Elm Springs Road, Suite B  
Springdale, AR 72762

Candlen Area Claim Center  
170 Garden Oaks Drive  
Candlen, AR 71701

Claim Centers are open 8:30 a.m. to 4:30 p.m. Monday through Friday, except State Holidays.

Online game prizes must be claimed on or before 150 days after the winning drawing. Instant game prizes must be claimed on or before 90 days after winning.

For more information call 501-623-2000

9/17/03

## CLAIMANT - COMPLETE THIS SECTION

1. NAME BRN MR. ROLD BAILEY  
2. MAILING ADDRESS [REDACTED]  
3. CITY COWLEY 4. STATE ARK 5. ZIP 72004  
6. PHONE NUMBER [REDACTED] 7. DATE OF BIRTH [REDACTED]  
8. TAX STATUS ☒ U.S. CITIZEN OR RESIDENT ALIEN 9. U.S. SOCIAL SECURITY NO. [REDACTED]  
CHECK ONE BOX ☐ NOT U.S. CITIZEN, NOT RESIDENT ALIEN. Provide country of citizenship below. You do not have to be a U.S. citizen to claim a prize. However, you must indicate your status for tax purposes.  
COUNTRY U.S.A.

CLAIMANT TYPE ☒ Individual ☐ Group

Prizes are subject to all applicable State and Federal taxes, including debt setoff provisions provided for in the Arkansas Scholarship Lottery Act. If you are claiming a prize as a member of a winning group with federal tax liability, an IRS Form 5754 must be submitted with this form.

Knowingly presenting a counterfeit, altered or stolen lottery ticket or knowingly filing a claim based on information that is untrue is in violation of Arkansas law.

Winner information is subject to disclosure under the Arkansas Freedom of Information Act (FOIA). A winner who receives a prize or prize payment from the ASL grants the ASL, its agents, officers, employees, and representatives the right to use, publish (in print or by means of the internet) and reproduce the winner's name, physical likeness, photograph, portraits, and statements made by the winner, and use audio sound clips and video or film footage of the winner for the purpose of press releases, advertising, and promoting the ASL.

By signing this form, I attest that I am at least 18 years of age. I further attest that I am eligible to claim a lottery prize pursuant to the laws and regulations governing the operation of the Arkansas Scholarship Lottery, and that under penalty of perjury, I declare to the best of my knowledge that all information provided on this form is true and accurate.

CLAIMANT'S SIGNATURE [Signature] DATE Jan 28 - 10

☒ ONLINE ☐ INSTANT 1207959552 00994 75450 CLAIM NUMBER PROVIDED BY  
☐ ONLINE ☐ INSTANT 40988 88634 32046 ARKANSAS SCHOLARSHIP LOTTERY  
☐ ONLINE ☐ INSTANT  
☐ ONLINE ☐ INSTANT  
PRIZE AMOUNT 25,000,000.00  
TYPE OF I.D. [REDACTED] NUMBER [REDACTED] DATE 01/28/10

AUTHORIZED SIGNATURE [Signature] OFFICIAL'S NAME (please print) Richard F. [Signature]

ASL USE ONLY

COPY

www.myarkansaslottery.com  
**Arkansas**  
Scholarship Lottery

PAY  
POWERBALL

Thu, Jan 28, 2010 14:07:40  
Retailer: 999200-999200 001  
DCN 1207959552 0099475456 4090080834

PAY: \$25,000,000.00

2913

www.myarkansaslottery.com  
Arkansas Scholarship Lottery

**POWERBALL**

12079 59552 00994 75456 40900 80834

	POWER PLAY - YES					PB
A	06	24	27	32	44	04
B	23	33	34	35	50	04
C	24	25	48	52	56	04
D	03	07	23	27	42	37
E	07	26	36	49	58	04

FOR 1 DRAW Sat Jan 02 10

Total: \$10.00

PLEASE SIGN REVERSAL SIDE OF THIS TICKET

1ED  
048



ARKANSAS SCHOLARSHIP LOTTERY

POWERBALL

12079 59552 00994 75456 40900 80834

FOR 1 DRAW Sat Jan 02 10

Total: \$10.00

POWER PLAY - YES

A 06 24 27 32 44 04

B 23 33 34 35 50 04

C 24 25 48 52 56 04

D 03 07 23 27 42 37

E 07 26 36 49 58 04

FOR 1 DRAW Sat Jan 02 10

Total: \$10.00

POWER PLAY - YES

A 06 24 27 32 44 04

B 23 33 34 35 50 04

C 24 25 48 52 56 04

D 03 07 23 27 42 37

E 07 26 36 49 58 04

FOR 1 DRAW Sat Jan 02 10

Total: \$10.00

POWER PLAY - YES