CASH 4 LIFE ($1,000 a DAY) PRIZE PAYMENT ELECTION FORM

I, __________________________, hereby IRREVOCABLY ELECT to
receive my Virginia Lottery jackpot prize from the _________ drawing for
ticket number __________________________ by the following payment method.

CHECK AND INITIAL ONE BOX ONLY:

☐ I elect the ANNUITY OPTION method of payment to receive my CASH 4 LIFE prize of
$1,000 per day for life.

The first installment, paid at the time of claim, will be prorated from the date of claim until
February 15th of the following year.

Subsequent annual installments of $365,000 will be paid on February 15th of each year for
the duration of my natural life. If that day falls on a weekend or a holiday the payment
shall be issued on the next business day. As required by law, federal and state income
taxes and any applicable debt set-off will be withheld from each annual installment.
Payments are guaranteed for 20 years.

☐ I elect the CASH OPTION method of payment to receive my CASH 4 LIFE jackpot prize.
I will receive one (1) lump sum payment of $7,000,000.

The payment will be issued in full within 15 business days after (i) the date of the claim or
(ii) the date this election form is completed, whichever is later. If that day falls on a
weekend or a holiday the payment shall be issued on the next business day. As required
by law, federal and state income taxes and any applicable debt set-off will be withheld
from the payment.

I hereby acknowledge that the payment options have been explained to me and that I am under no
obligation to accept the cash option. I understand that I may receive the winnings to which I am
entitled under the annuity payment method. I understand that I have 60 days from the date of
claiming this prize to make an election. I further acknowledge that once I make an election it is
irrevocable and can not be changed.

______________________________  ____________________________
(Signature)  (Date)

STATE OF VIRGINIA  COUNTY/CITY OF ___________________________ on _____/_____/____
The individual whose name is signed to the foregoing Instrument appeared before me
and acknowledged that this instrument was executed by him/her and that the foregoing
signature is his/hers. He/she/they is/are personally known to me or has/have produced
______________________________ as identification.

Notary Signature: ____________________________  My Commission Expires: __________________

(5/15 NEW)
VIRGINIA LOTTERY
CASH 4 LIFE ($1,000 a Week) PRIZE PAYMENT ELECTION FORM

I, __________________________, hereby IRREVOCABLY ELECT to receive my Virginia Lottery jackpot prize from the ___________________________ drawing for ticket number ___________________________ by the following payment method.

CHECK AND INITIAL ONE BOX ONLY:

☐ I elect the ANNUITY OPTION method of payment to receive my CASH 4 LIFE prize of $1,000 a WEEK FOR LIFE.

The first installment, paid at the time of claim, will be prorated from the date of claim until February 15th of the following year.

Subsequent annual installments of $52,000 will be paid on February 15th of each year for the duration of my natural life. If that day falls on a weekend or a holiday the payment shall be issued on the next business day. As required by law, federal and state income taxes and any applicable debt set-off will be withheld from each annual installment. Payments are guaranteed for 20 years.

☐ I elect the CASH OPTION method of payment to receive my CASH 4 LIFE prize. I will receive one (1) lump sum payment of $1,000,000.

The payment will be issued in full within 15 business days after (i) the date of the claim or (ii) the date this election form is completed, whichever is later. If that day falls on a weekend or a holiday the payment shall be issued on the next business day. As required by law, federal and state income taxes and any applicable debt set-off will be withheld from the payment.

I hereby acknowledge that the payment options have been explained to me and that I am under no obligation to accept the cash option. I understand that I may receive the winnings to which I am entitled under the annuity payment method. I understand that I have 60 days from the date of claiming this prize to make an election. I further acknowledge that once I make an election it is irrevocable and can not be changed.

_________________________________________  ___________________________
(Signature)  (Date)

STATE OF VIRGINIA  COUNTY/CITY OF_________________________ on _____/_____/______

The individual whose name is signed to the foregoing instrument appeared before me and acknowledged that this instrument was executed by him/her and that the foregoing signature is his/hers. He/she/they is/are personally known to me or has/have produced ___________________________ as identification.

Notary Signature: ___________________________  My Commission Expires: _____________________

(5/15 NEW)