



**WYOMING GAME AND FISH DEPARTMENT**  
**ELK, DEER, AND ANTELOPE LANDOWNER COUPON CLAIM FOR PAYMENT FORM**

Rev 02/16

**INSTRUCTIONS TO LANDOWNER:**

1. The landowner coupon claim must be signed by the deeded landowner or legal representative. The individual signing must either be the same individual as the name printed below or in the case of a corporation, trust, limited liability company, or legal partnership, an authorized agent of the entity.
2. Complete Landowner Payment Information, Payment Designation (check one only), and Signature Statement sections on Page 1 of this form. Complete Landowner Coupons Claimed section on Page 2 of this form.
3. **On or before March 1** following the hunt year for which the license was valid, this properly completed coupon claim form with attached signed coupons must be delivered to your local game warden or regional office in which your deeded land is located.

**LANDOWNER PAYMENT INFORMATION:**

In accordance with IRS Code, the Social Security or Tax ID Number for the individual or entity receiving the payment must be provided below. This payment, regardless if it is donated to the Animal Damage Management Board or retained personally, will be reportable by the Wyoming State Auditor for tax purposes under the number provided.

**INDIVIDUAL**

Social Security Number: \_\_\_\_\_

\_\_\_\_\_  
 Name of Individual

**OR**

**CORPORATION, LEGAL PARTNERSHIPS, LLC'S, OR TRUSTS**

Tax Identification Number: \_\_\_\_\_

\_\_\_\_\_  
 Name of Entity

\_\_\_\_\_  
 Street Address or Box Number (mailing address)

\_\_\_\_\_  
 Email address

\_\_\_\_\_  
 City State Zip Code Phone Number Fax Number

**PAYMENT DESIGNATION:**

PLACE A CHECK MARK TO INDICATE YOUR PAYMENT DESIGNATION

**(CHECK ONLY ONE BOX)**

**OR**

I designate the payment be made to the landowner.

I designate the payment be donated to the Animal Damage Management Board (ADMB). I understand that 50% of the revenue generated from these donations may be allocated to the county in which I reside, if an agreement is in place between the County predator management district and the ADMB. Also, I understand that I could designate a specific county to receive this donation, if desired. If you are electing to have this donation directed to a specific county, please indicate the county below.

County designation for donation: \_\_\_\_\_

**SIGNATURE STATEMENT:**

I, the undersigned, certify under penalty of perjury, that I am the owner or legal representative of the landowner of the deeded lands in Wyoming upon which the coupons claimed on the reverse side of this document were collected from hunters who killed elk, deer, and/or antelope on said land.

I, the undersigned, further certify, under penalty of perjury, that this claim is just and correct in all respects and that payment for the coupons claimed is to be in accordance with W.S. 23-3-105(b).

If the undersigned has designated the Animal Damage Management Board, as created by W.S. 11-6-306, to receive their payment for landowner coupons claimed on this form in accordance with W.S. 23-3-105(b), they further acknowledge that as this designation is voluntary, the payment will still be reportable by the Wyoming State Auditor for tax purposes, under the Social Security or Federal Tax Identification number listed on this form.

\_\_\_\_\_  
 Claimant Name and Signature

\_\_\_\_\_  
 Date

