



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

Rev 01/2021

**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:**

The Social Security or Tax ID Number for the individual or entity identified below has been previously provided to the State Auditor's Office for establishment of this vendor. 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 individual or entity information identified below.

**VENDOR NUMBER:** \_\_\_\_\_

**VENDOR NAME:** \_\_\_\_\_

**VENDOR ADDRESS:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

The Wyoming Game and Fish Department, Fiscal Division, may need to get in contact with you regarding processing this payment request. Please provide your contact information below:

**EMAIL ADDRESS:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_ **FAX NUMBER:** \_\_\_\_\_

PLACE A CHECK MARK TO INDICATE YOUR PAYMENT DESIGNATION  <b>(ONLY CHECK          ONE BOX)</b>		I designate the payment be made to the landowner.
	<b>OR</b>	
		I designate the payment be donated to the Animal Damage Management Board (ADMB).

**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 associated with the vendor information identified above.

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

\_\_\_\_\_  
 Date

**LANDOWNER COUPONS CLAIMED SECTION: (TO BE COMPLETED BY LANDOWNER ONLY)**

Please indicate the total number of coupons you are submitting for each species listed below in addition to the total number of coupons being remitted for payment.

ELK: \_\_\_\_\_ + DEER: \_\_\_\_\_ + ANTELOPE: \_\_\_\_\_ = TOTAL COUPONS CLAIMED: \_\_\_\_\_

Landowner coupons summarized in the counts above must be provided to your **local game warden** or **regional office** in which your deeded land is located along with this form **no later than March 1**.

**GAME WARDEN AUTHORIZATION FOR PAYMENT SECTION: (TO BE COMPLETED BY GAME WARDEN ONLY)**

Upon review of the individual landowner coupon(s) document received from the landowner, please indicate below the total number of claims for each species that you are approving for payment in addition to the total number of coupons approved for payment.

ELK: \_\_\_\_\_ + DEER: \_\_\_\_\_ + ANTELOPE: \_\_\_\_\_ = TOTAL COUPONS APPROVED: \_\_\_\_\_

Please indicate below the specific landowner coupon(s) document that you are NOT approving for payment along with a reason the payment is being denied.

License Number Denied	Reason for denial

NOTE: All landowner coupon documents must be submitted to Fiscal Division even though they may be listed in your denial payment chart and not approved for payment claim.

\_\_\_\_\_   
 Game Warden Name & Signature

\_\_\_\_\_   
 Warden District Code

\_\_\_\_\_   
 Date

**FISCAL DIVISION AUTHORIZATION FOR PAYMENT SECTION: (TO BE COMPLETED BY FISCAL DIVISION ONLY)**

Upon review of the individual landowner coupon documents received from the game warden, please indicate below the total number of claims for each species that you are approving for payment in addition to the total number of coupons approved for payment.

ELK: \_\_\_\_\_ + DEER: \_\_\_\_\_ + ANTELOPE: \_\_\_\_\_ = TOTAL COUPONS APPROVED: \_\_\_\_\_

PAYMENT DONATED TO ADMB? \_\_\_\_\_ YES \_\_\_\_\_ NO                      X \$16.00 = \_\_\_\_\_

Please indicate below the specific landowner coupon document(s) that you are NOT approving for payment along with a reason the payment is being denied.

License Number Denied	Reason for denial

\_\_\_\_\_   
 Fiscal Division Employee Name & Signature

\_\_\_\_\_   
 Date

STATE OF WYOMING VENDOR #:

For Department Use Only

CLAIM #

For Department Use Only