TicketLiquidator.com Catch A Game On Us Promotion Request for Reimbursement Form

Original Purchaser's

First name		Middle Initial		Last Name	
Address		City	State	Zip Code	
Email Address	Tel	ephone Number			
Below please list the required information for the Major League Baseball Ticket Orders you purchased on the www.TicketLiquidator.com Website during March 14, 2016 through April 30, 2016 and that you are now submitting for reimbursement. Please use the back of this form if you have more than five (5) Ticket Orders to submit.					
Date of Purchase	Confirmation Number	Number of Tickets	Home Team on Tickets	Dollar Amount of Order	

Request for Reimbursement form and supporting documentation must be postmarked no later than November 30, 2016.

The following required items must be mailed to **Ticket Liquidator** at: Ticket Liquidator 2016 Baseball Promotion 75 Gerber Road East South Windsor, CT 06074

- 1) A fully completed and signed Request for Reimbursement form,
- 2) Proof of **Eligible Purchase** (copy of electronic ticket with barcode or a copy of ticket stubs clearly showing section, row, and seat numbers),
- 3) Eligible Purchase receipt showing tickets purchased and confirmation number for the purchase,
- 4) Any other documentation that may be reasonably requested by **Ticket Liquidator** to validate a claim.

Once all documentation is received qualifying reimbursements will be paid by **Ticket Liquidator** by check in U.S. funds within ten (10) business days.

THE CLAIM INFORMATION STATED ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

NOTICE: Any person who, knowingly and with intent to defraud any entity or other person, files a statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any factual material thereto, commits a fraudulent act, which is a crime.

By signing below, I authorize Ticket Liquidator, and all their authorized representatives to verify all information and documentation provided by me and contained in this Request for Reimbursement form. This Request for Reimbursement Form does not waive any of the terms and conditions of the Program.

Original Purchaser's Signature

Date

MLB-RFR (031416)