



Date Received	Claim No.	Record No.
---------------	-----------	------------

Lost / Damaged Ticket Search Form

SA Lotteries

Conditions of Search

1. Only one lottery, Keno or Instant Scratch-Its ticket per Lost/Damaged Ticket Search form.
2. The Statutory Declaration must be completed prior to the search proceeding.
3. Search form must include details of the date, time and place of purchase. Where the exact time of purchase is not known, the 20 minute period within which the ticket may have been purchased must be included.
4. Please forward completed form to: **ADMINISTRATION, Locked Bag 4, Adelaide SA 5001.**
5. SA Lotteries is not required to pay prizes in respect of unregistered lottery, Keno and Instant Scratch-Its tickets that cannot be produced for prize verification, and as such clear and irrefutable evidence satisfactory to SA Lotteries will be required before SA Lotteries will exercise its discretion to pay a prize on an entry that is the subject of this claim.
6. In accordance with the State Lotteries Act 1966, any prizes not claimed within 12 months of the lottery or Keno draw, or 12 months after the game closure for Instant Scratch-Its, are forfeited to the SA Lotteries Commission and transferred to the Unclaimed Prizes Reserve. The Commission may, but is not obliged to, make an ex gratia payment for claims on tickets where the 12 month claim period has expired or for claims on unregistered lost or damaged tickets.
7. The claimant will indemnify SA Lotteries against any subsequent claims or payments on the ticket to which the claim applies. Any prizes already paid will not be considered.
8. Subject to conditions 6 and 7, successful searches resulting in a prize will be paid pending verification and approval from the SA Lotteries Commission.

We collect your personal information in this form when you require us to conduct a search on your lost/damaged ticket. Please read our full Collection Notice and our Privacy Policy at www.thelott.com/about/privacy

1. Customer details

First Name

Last Name

Residential Address

Postcode

Daytime Contact No.

Mobile No.

Date of Birth

Email

Are you an owner or staff member of a SA Lotteries Outlet?

Yes

No

May 2025



Official Home of Australia's Lotteries



Gamble Responsibly 1800 858 858

Please return original completed form to:
Administration, Locked Bag 4,
Adelaide SA 5001
For assistance please call 131 868



2. Ticket purchase details

Did you use your Members Club Card when purchasing this ticket? No Yes ▶ Specify members club card details below

What is the name of the Outlet where the ticket was purchased?

What is the address of the Outlet where the ticket was purchased?

Postcode

Date of purchase

Time of purchase (must be 20 minute period if exact time is not known)

____ / ____ / ____

____ am/pm to

____ am/pm

If you purchased other tickets at the same time please attach details including photocopies if possible.

3. Ticket and prize details

Enter the ticket number (if available)

a. Which game/s did you play?

Saturday X Lotto

Weekday Windfall

Oz Lotto

Set for Life

Powerball

Lucky Lotteries
Super Jackpot

Lucky Lotteries
Mega Jackpot

Monday and
Wednesday X Lotto

Super 66

Instant Scratch-its

Go to g

SA Keno

▶ Go to h

b. Date of draw

____ / ____ / ____

c. Draw number

d. Type of entry played (select all relevant options from below):

Marked

No of games played

QuickPick

Numbers played (if known)

Pick Entry

PowerHit

Other information (for example, type or number of system / PowerHit entry)

System

e. Did you play a syndicate entry?

Please add information (such as syndicate number and/or type of entry)

Yes

No

May 2025



Official Home of Australia's Lotteries



Gamble Responsibly 1800 858 858

Please return original completed form to:

Administration, Locked Bag 4,

Adelaide SA 5001

For assistance please call 131 868



f. How many weeks was the ticket played for?

g. Instant Scratch-Its

Game Name _____ Game Number (if known) _____

h. SA Keno

Keno only _____ Coin Toss Only _____ Both _____

Date of draw _____ / _____ / _____ Draw number _____ Spot No (1-10) _____

Entry Type (Single/Doubles/Triples/Quads/All Ways) _____ Number of games played _____

i. Ticket price and prizes

What was the cost of the ticket? _____

Was there a prize on the ticket? _____ Winning Numbers _____ Prize Division _____

4. Lost/damaged details

The ticket was: Lost _____ Destroyed _____ Stolen _____ Damaged _____

▶ If ticket is damaged please return the damaged ticket with this form.

Where did this occur? _____ Date _____ / _____ / _____ Time _____ am/pm

Attach or detail below any additional information that may assist in this search:

5. If claim is successful - prize payment

BSB No. _____ Acc No. _____ Acc Name _____

(v) Please tick if you would like us to add these bank details to your membership profile for future prize payments.



Gamble Responsibly 1800 858 858
Please return original completed form to:
Administration, Locked Bag 4,
Adelaide SA 5001
For assistance please call 131 868



6. Statutory declaration (Must be completed by the claimant)

I, _____, of
Name

_____,
Address

_____, make the following statutory declaration under the Oaths Act 1936.
Occupation

I hereby claim any prizes associated with the lost / damaged ticket and I declare that:

- a) To the best of my knowledge and belief that all of the information in this claim is true and correct;
- b) I am over the age of 18 years; and
- c) I am the rightful owner of the lost / damaged ticket.

I declare that the contents of this statutory declaration are true and correct and I make it knowing that making a statutory declaration that I know to be untrue is an offence.

Claimant Signature (to be signed in front of an authorised witness)

A Justice of the Peace, Commissioner for taking affidavits or Notary Public may witness this statutory declaration.

Taken and declared before me at _____
Place

in the State of South Australia on _____
date

Qualification

Name

Address

Signature of Authorised Witness