

Lost/Damaged Ticket Search Form

Conditions of Search

Date Received	Claim No.	Receipt No.
---------------	-----------	-------------

1. Only one lottery or Instant Scratch-Its ticket per Lost/Damaged Ticket Search form.
2. A search fee of \$15.00 must be paid to Golden Casket by debit or credit card in person, or Visa card (refer Section 7. Payment Details) prior to the search proceeding.
3. The Statutory Declaration must be completed prior to the search proceeding.
4. 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.
5. Please forward completed form to: **ADMINISTRATION, Locked Bag 1, Spring Hill Qld 4004.**
6. Golden Casket is not required to pay prizes in respect of unregistered lottery and Instant Scratch-Its tickets that cannot be produced for prize verification, and as such clear and irrefutable evidence satisfactory to Golden Casket will be required before Golden Casket will exercise its discretion to pay a prize on an entry that is the subject of this claim.
7. Successful searches resulting in a prize will be paid after the claim period (4 weeks) has elapsed.

1. CUSTOMER DETAILS

Mr Mrs Miss Ms

First Name

Last Name

Residential Address

Postcode

Daytime Contact No.

Mobile No.

Date of Birth

Email Address

Are you an owner or staff member of a Golden Casket Outlet?

Yes No

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

What 20 minute time period was the ticket purchased in?

am/pm

to

am/pm

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

Complete game details overleaf



Please return completed form via:

Administration, Locked Bag 1, Spring Hill QLD 4004

131 868

customersupport@thelott.com



HAVE FUN & PLAY RESPONSIBLY



Lost/Damaged Ticket Search Form

3. TICKET AND PRIZE DETAILS

Enter the ticket number from your ticket (if available)

a. Which game/s did you play?

Saturday Gold Lotto Oz Lotto Mon & Wed Gold Lotto Powerball
 Super 66 Lucky Lotteries Super Jackpot Lucky Lotteries Mega Jackpot

Set for Life **GO to j** Instant Scratch-Its **GO to n**

b. Date of draw

c. Draw number

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

Marked No. of games played:

QuickPick **Entry Type (please tick below):**
 MAXI JUMBO MEGA SUPER
 REGULAR MINI

Lucky Lotteries Super Jackpot (Random) Lucky Lotteries Super Jackpot (Sequential)
 Lucky Lotteries Mega Jackpot (Random) Lucky Lotteries Mega Jackpot (Sequential)

Pick Entry **Pick Type (please enter number below):**

PowerHit **PowerHit Type (please enter number below):**

System **GO to e**

e. Did you play a System entry?

No **GO to f**

Yes What type of System? (7 to 20)

f. How many weeks was the ticket played for?

g. Did you play a Syndicate entry?

No **GO to h**

Yes Syndicate Number (if known)

Syndicate Type / System

h. Did you play Super 66?

No **GO to k**

Yes Single Multiple

i. What are your Super 66 numbers?

(If more than one, provide numbers in additional information - Section 4).

j. Set for Life

What type of entry played (select from options below):

Game Panel No. of games played:

TOP UP

Entry Type (please tick below)

2 3 4 5 10 15 25 50

Date of First Draw

Multi-week 2 3 4 5 6+

QuickPick

STANDARD REGULAR

SUPER MEGA

JUMBO GIANT

MIGHTY MAXI

k. Did you win a prize?

Unknown **GO to Section 4**

Yes Numbers on winning game (if unsure, leave blank)

l. What prize division are you claiming?

1st 2nd 3rd 4th 5th 6th 7th 8th 9th

m. What was the dollar cost of the ticket?

\$

n. Instant Scratch-Its Tickets

Cost of ticket and game name \$ Game Name

Game Number (if known) Did you win a prize? Yes No Unsure

If yes, what was the prize on the ticket? \$

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?

When 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

Direct Deposit

BSB No.

Acc No.

Acc Name

Complete declaration details overleaf



Official Home of Australia's Lotteries

Please return completed form via:

Administration, Locked Bag 1, Spring Hill QLD 4004

131 868

customersupport@thelott.com



HAVE FUN & PLAY RESPONSIBLY



In-store



Online



App

Lost/Damaged Ticket Search Form

6. STATUTORY DECLARATION (Must be completed by the claimant)

I,
Name

of
Address

....., in the State of QLD TAS NT solemnly and sincerely declare that:
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.

And I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the:

- Oaths Act 1867 (QLD)
- Oaths Act 2001 (TAS)
- Oaths Affidavits and Declarations Act 2010 (NT)

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

**In Queensland, a Justice of Peace, Commission for Declarations or lawyer may witness this statutory declaration.
In Tasmania, for a full list of authorised persons that may witness this statutory declaration, please visit: https://www.justice.tas.gov.au/commissioners-for-declarations-and-justices-of-the-peace/commissionersfordeclarations/list_of_groups
In the Northern Territory, any person over 18 years old may witness a statutory declaration made in the Northern Territory.**

Taken and declared before me at this day
Place Date

.....
Occupation

.....
Address

.....
Signature of Witness

7. PAYMENT DETAILS (Please complete details below if you wish to pay the \$15 search fee via Visa card)

Name (as it appears on your credit card)

Visa

Credit card No.

Expiry Date

I authorise Golden Casket Lottery Corporation Limited to charge my credit card for the amount indicated on or after the date specified.

Amount

Signature

Date

Please do not email form if using credit card as payment.

Collection of personal information

We are collecting your personal information in this form for the purposes of registering, verifying and/or paying a prize and for the purposes of providing you with our products and services. If we cannot collect your personal information, we will not be able to process your prize claim. The collection of this information is permitted under the game rules. The personal information we collect may be disclosed to other entities in The Lottery Corporation Group, a third party as required by law and to third parties who assist us in running our business. Some of these third party service providers may be located offshore. For more information about these offshore disclosures, our handling practices and details about how you may access and seek correction of your personal information or make a complaint please refer to our Privacy Policy located at www.thelotterycorporation.com/privacy



Please return completed form via:

Administration, Locked Bag 1, Spring Hill QLD 4004

131 868

customersupport@thelott.com



HAVE FUN & PLAY RESPONSIBLY

