Prize Claim Form

A On the back of your ticket, complete the information requested and sign your name. If you do not sign the back of the ticket and it is lost or stolen, anyone can claim your prize. **NOTE: Prizes of $100 or less can be claimed at any retailer. A claim form is ONLY required for prizes of $101 or more.** Visit https://lottery.sd.gov/claim-your-prize for more information.

Prizes from **$101 to $5,000** may be claimed through the South Dakota Lottery's mobile app. Scan the QR code at the bottom of this form for info.

B Complete items 1-19 below. This form may be used for claiming either an instant scratch or lotto prize.

C Staple your ticket to the top left corner of this form. Keep the yellow copy for your records and mail the white copy to :

South Dakota Lottery, 711 E. Wells Avenue, Pierre, SD 57501

Or hand deliver your ticket and the completed claim form to any Lottery Office.

1 LAST NAME (Please Print) | FIRST NAME (Please Print) | M.I. | 2 SEX

3 MAILING ADDRESS (STREET OR BOX #) | 4 CITY | 5 STATE

6 ZIP CODE | 7 SOCIAL SECURITY NUMBER* | 8 DATE OF BIRTH

9 DAYTIME TELEPHONE | 10 PRIZE AMOUNT CLAIMED | 11 ☐ U.S. Citizen ☐ Resident Alien ☐ Non-Resident (CHECK ONLY ONE)

12 EMAIL ADDRESS | 13 FORM OF PAYMENT ☐ Check ☐ ACH Deposit (CHECK ONLY ONE)

14 BANK ROUTING NUMBER (Only complete if ACH Deposit is selected) | 15 BANK ACCOUNT NUMBER (Only complete if ACH Deposit is selected)

16 BANK NAME | 17 BANK ACCOUNT Type (Checking, Savings ect.)

18 INSTANT TICKET INFORMATION
Complete this area if you are claiming a scratch ticket prize.
Number on back of the ticket below the bar code

19 LOTTO TICKET INFORMATION
Complete this area if you are claiming a lotto prize.
Validation Number (below the logo)

PLEASE READ AND RESPOND TO 20, 21, AND 22, THEN SIGN AND DATE BELOW.

20 May the Lottery use your personal information for advertising (such as print, radio, television and social media)? ☐ Yes ☐ No

21 May the Lottery also take and use your photo or video image for public purposes (such as print, radio, television and social media)? ☐ Yes ☐ No

22 Do you own or work for a business that sells South Dakota Lottery tickets?If yes, identify the business and location. ☐ Yes ☐ No

Name of Business: _____ City: _____

I declare, under penalty of perjury, that all information provided is true and correct to the best of my knowledge and that I am not a person prohibited by law from purchasing a lottery ticket or claiming or accepting a prize from the Lottery. I understand that any person who, with intent to defraud, falsely makes, alters, forges, passes, or counterfeits a ticket is guilty of a felony pursuant to SDCL 42-7A-30.

Claimant/Winner's Signature _____ **Date** _____

*Your social security number will be used to report the amount of your prize to the Internal Revenue Service as required by federal law, and to determine whether a debt is owed to or collected through a state agency pursuant to SDCL 42-7A-51 *et seq.*

For Lottery Office Use Only **Mail** ☐ **Hand Delivered** ☐

Received by _____ **Date** _____ **Claim #** _____ **Check #** _____ **ACH #** _____