Revised 2/2016

VIDEO LOTTERY BURGLARY REPORT FORM

This form may be completed on-line or printed for hard-copy use. Completed hard copies of this form should be mailed to South Dakota Lottery, Attn: Security Director, 711 E. Wells Ave., Pierre, SD 57501. Completed electronic copies of this form should be emailed to robyn.seibel@state.sd.us. Questions can be directed to 605.773.5770.

Operator/Establishment Information

Operator Number:_____ Operator Name: _____

Establishment Number:_____ Establishment Name:_____

Establishment Address: _____

Alarm system installed: Y___ N___ Recordable monitoring installed: Y___ N___

Cash removed nightly: Y___ N___ Covered by theft insurance: Y___ N___

Safe used to store cash: Y___ N___

Details of Incident

Date Law Enforcement Notified:___/___/___ Responding Agency:_____

Investigating Officer: _____ Telephone Number:_____

Establishment telephone lines cut? Y___ N___ Electrical power to the terminals cut? Y___ N___

Describe method of entry into the establishment:

_____

_____

Describe method of entry into the terminals:

_____

_____

Additional comments:

_____

_____

	Terminal Ser. #	Permit #	Machine Make/Model	$ Loss	$ Damage	Misc.
1				$	$	
2				$	$	
3				$	$	
4				$	$	
5				$	$	
6				$	$	
7				$	$	
8				$	$	
9				$	$	
10				$	$	

Video Lottery payment funds taken: $ _____ Non-Video Lottery money taken:$ _____

Report completed by: _____ Phone #: _____ Date: _____