Fort Randall Casino & Hotel Win/Loss Statement Request Form

| I am requesting a Win/Loss statement for the year 20All lines must be completed for form to be processed. | to be mailed to me at the address below. |
|---|---|
| Win/Loss statements will only be issued at the end of the | ne year to assist in the preparation of taxes. |
| Playerøs Club No: | |
| NAME: | |
| ADDRESS: | |
| City/State/Zip:/ | |
| Province/Country: | |
| Phone: | |
| Social Security Number: | |
| Date of Birth: | |
| Patron Signature: | |
| A I | Fort Randall Casino Attn: Marketing PO Box 229 Pickstown, SD 57367 |

Or Fax to: 605-487-7354

If additional information is needed, please call (605) 487-7871, ext. 456.

Please refer to: <u>WWW.IRS.GOV/taxtopics/tc419.html</u> for further information regarding Gambling and Income Expenses.

Thank you for playing at the Fort Randall Casino. We appreciate your patronage.