

## **Request for Win/Loss Statement**

In order for a Win/Loss Statement to be issued to you, the following form must be completed in full, signed by the guest making the request, and returned to your local OTB. The Win/Loss Statement will reflect our records of your card-in play for the calendar year you request as of the date indicated below. A valid government issued photo ID is required.

Today's Date	Calendar Year requested: Local OTB/HHR Location
Name	
Address	
City	State Zip
Telephone Number	Player Card Number
Date of Birth	Email Address_
Drivers License Number	State Issued
Downs. The tracking so	nt will include estimated Instant Racing win/loss information from Wyoming stem used in providing this information is based on the use of your Players atement will not reflect an accurate accounting record—it merely provides an ompare to your records. The IRS recommends that you keep your own records
of your gaming activity  I do hereby certify that the provide me a Win/Loss S I agree to release and ho	e information contained above is true and correct, and I authorize Wyoming Downs attement of my Player's Club account tracked gaming activity. In consideration of thid harmless Wyoming Downs, and all of its directors, employees, officers, managers,
	esentatives from any and all claims, causes actions, liabilities, cost, or damages the information and its release as a result of this request.
account history and is no	he requested is generated from a player's tracking system based on my Player's Clu intended to be, or take place of, my own records of my gaming activity. Wyoming tation or warranty, express or implied, as to the accuracy of this information or its innings and losses.
Guest Signature	Date
	Do not write below the line; Wyoming Downs use only
Date Received:	Date Mailed:
Statement Year:	Completed By: