For official use only	WL ID: _____
Received: __/__/___	Verified by: ____
Sent: __/__/__	Sent by: _____

Presque Isle Downs & Casino Win/Loss Statement Request

To request a Win/Loss Statement VIA MAIL, please fill out the following information and return to

Presque Isle Downs & Casino
Attn: Win/Loss
PO Box 10728
Erie, PA 16514

Please note that Win/Loss Statements are not W2G forms. Copies of W2G forms can be acquired thru our Cashier.

Must be a Roarin' 20's Players Club member. Presque Isle Downs is not permitted to print partial Win Loss Statements; therefore, all requests will be processed after year's end. Please allow 2 weeks to process.† Request can also be taken at the Roarin' 20s Player's Club. Statements will not be sent until January 4th, 2010.

PLEASE PRINT

***Player ID: _____** ***Year of Win/Loss Statement _____**
(Front of Roarin' 20s Player's Card) **(One year per request, please)**

***First Name: _____**

***Last Name: _____**

***Date Requested: ____/____/____**

***Mailing Address: _____**

_____
City **State** **Zip**

***Date of Birth: ___/____/____**

***SSN: _____(for Win Loss Statement inquiries only)**

***Drivers License #: _____**

***Signature: _____**

***Phone Number: (____)-____-_____**

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† This information is required for account identification purposes. Incomplete forms will not be processed. If you have further questions, email kspyker@pidowns.com.

* INDICATES REQUIRED FIELD