



Comps Plus Club 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 the Comps Plus Club booth along with valid photo ID. 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.

Today's Date: _____ Calendar Year Requested: _____

Name _____ Date of Birth _____

Address _____

City _____ State _____ Zip _____

Comps Plus Account Number _____

Telephone Number _____

Driver License Number _____ Social Security Number _____
optional

How would you like your Win/Loss Statement delivered to you?

Postal Mail _____ Email _____ Pick up at Comps Plus Club _____

Mail this form to 2065 Idaho Street, Elko, NV 89801, or email to ellen.bird@playelko.com

By signing this Request form, I understand and acknowledge that no warranty is made by Red Lion Hotel & Casino and/or Gold Country Inn & Casino as to the accuracy or completeness of the Win/Loss Statement. The Statement is only an estimate, and is dependent on my proper use of the Player Rewards Card. I also understand that I am responsible for making sure that all winnings previously reported to me on any IRS Form W2-G are reflected in the Win/Loss Statement.

Guest Signature _____ Date _____

If you have any questions regarding this form or the Win/Loss Statement, please contact Kristin Cade, Players Club Manager at (775) 753-0561.

OFFICIAL USE ONLY
Received/ID Verified by: _____ Date: _____

Statement printed/mailed by: _____ Date: _____

Please note: You MUST attach a copy of your valid identification with your request.