

**Monticello Casino & Raceway
Players' Club
Win / Loss Statement Request**

Please present this request to the Players' Club window. If this request is not presented in person please mail the original request to: **Monticello Casino & Raceway, Attn: Compliance Dept., 204 Route 17B, Monticello, NY, 12701.**

I hereby request the release of my win/loss statement from Monticello Casino & Raceway. Please be advised that this information is derived from the use of your Players' Club Card as recorded in the Players' Club rating system, which is maintained for marketing purposes only.

Signature: _____ Date: _____

First Name:	Last Name:
Date of Birth:	Players Club Account Number:
Home Address:	
City/State/Zip:	
Telephone Number:	Email Address:

Win/Loss Statement Guidelines:

1. Win/Loss Statements will only be processed for the current tax year.
2. All requests, whether received by mail or in person, will be processed starting January after that tax year.
- 3. All requests that are mailed must have a copy of valid state issued picture ID.**
4. One request form per account number.
5. Win/loss statements can only be requested by Players' Club members.

Photo ID/D.L. info _____ PC Rep _____

Printed Date: _____ PC Rep _____