



## REQUEST FOR WIN/LOSS STATEMENT

**FOR SECURITY PURPOSES, A COPY OF YOUR DRIVER'S LICENSE OR STATE ID MUST BE INCLUDED WITH ANY REQUEST.**

All information requested on this form must be filled out. Forms not completely filled out will not be honored.

Account Holder's First Name (Please Print)                      MI                      Last Name

Mailing Address    City                      State                      Zip

Infinity Card Number    Social Security Number    Date of Birth

Phone Number    Fax Number (only if you prefer statement faxed)

Tax Year(s) Requested: \_\_\_\_\_

**MAIL REQUEST TO:**

River Spirit Casino  
Attn: Marketing Database Analyst  
PO Box 700833  
Tulsa, OK 74170-0833

**OR FAX TO: 918-995-8739**

Statements will be mailed to address provided. Allow two weeks for processing. No information will be provided over the phone. W2G information is not included in the Win/Loss Statement and will need to be requested separately through the casino's accounting office.

The information requested is associated with internal marketing information only, and reflects information currently available in the database resulting from carded electronic and table games play at the River Spirit Casino property only. River Spirit Casino makes no representation or warranty as to the accuracy of this information or its effectiveness as proof of losses.

Account Holder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DO NOT WRITE IN BOX BELOW. FOR RIVER SPIRIT CASINO USE ONLY**

<b>Date Received:</b>	
<b>Processed By:</b>	
<b>Processing Completed Date:</b>	