

**Seneca Allegany Casino & Hotel
Win/Loss Statement Request Form**

I request a Win/Loss statement for tax year _____ to be mailed to me at the address below. All lines must be completed for form to be processed.

Win/Loss statements will only be issued at the end of the year to assist in preparation of taxes.

Patron Number: _____

Name: _____

Street Address: _____

City/State/Zip: _____/_____/_____

Province/Country: _____/_____

Phone: _____

Social Security Number: _____

Date of Birth: _____

Patron Signature: _____

Please return complete form to:

**Seneca Allegany Casino
777 Seneca Allegany Blvd
Salamanca, NY 14779**

Attention: Casino Controller

If additional information is needed, please call (716) 244-5147. Completed forms may be faxed to (716) 945-5946.

Please refer to: WWW.IRS.GOV/taxtopics/tc419.html for further information regarding Gambling and Income Expenses.

Thank you for choosing to play at Seneca Allegany Casino. We hope to see you back soon!