

WIN/LOSS REQUEST FORM

Print this form, fill it out, sign it, and return to Rhythm City® Casino Resort.

Win/Loss Statements will be available in January of each year for the prior year*. Contact information is below:

Mail to: Rhythm City Casino Resort FAX to: Win/Loss Statement Services

Win/Loss Statement-Player's Club 563-328-8012

7077 Elmore Avenue Davenport, Iowa 52807 Scan & Email to: win.loss@RhythmCityCasino.com

Your Win/Loss Statement will be sent to your address on record at the Player's Club, or you may pick up your statement(s) at the casino. You may verify your current information on file by stopping by the Player's Club at Rhythm City Casino Resort, or by contacting your Casino Host. If you do not have a Casino Host, you may call 563-328-8000 and ask for the Player's Club.

We will compare your data below to your record on file before issuing any information. Please allow at least one week for delivery.

Patron: First Name (Pleas	e Print)	MI	Last Name		
Street Address		City		State	Zip
Player's Card Number	Last Four Digits of Social Sec	urity#	Drivers License Number		
Date of Birth	Phone Number				
Tax Year(s) Request	ed:				
Method of Delivery	to you: Mail my state	ment	(s) to my address on f	le	
	I will pick up r	my sta	ntement(s) at the Play	er's Club	
	••		s for processing and l	<i>-</i>	-
*Win/Loss Statement data is or	nly available beginning on February 7, 20	14. Prior	information is not available from	Rhythm City C	asino Resort.

Your Win/Loss Statement will include estimated Slot and Table Game win/loss information from Rhythm City Casino Resort. The tracking system used in providing this information is based on the use of your Player's Club Card (this report does not include <u>any uncarded</u> play). Therefore, this statement will not reflect an accurate accounting record-it merely provides an estimate you can use to compare to your records. The IRS recommends that you keep your own records of your gaming activity.

I do hereby certify that the information contained above is true and correct, and I authorize Rhythm City Casino Resort to provide me a Win/Loss Statement of my Player's Club account tracked gaming activity. In consideration of this, I agree to release and hold harmless Rhythm City Casino Resort, and all of its directors, employees, officers, managers, affiliated persons, and representatives from any and all claims, causes of action, liabilities, costs, or damages arising from or relating to the information and its release as a result of this request. I further understand that the information requested is generated from a player's tracking system based on my Player's Club account history and is not intended to be, or take place of, my own records of my gaming activity. Rhythm City Casino Resort makes no representation or warranty, express or implied, as to the accuracy of this information or its effectiveness as proof of winnings and losses.

winnings and losses.			
Patron Signature:	Date:		
For DVCR Internal Use:			
Prepared by:	Badge Number:	Date:	
Delivery Method: 🗆 Mailed via US Mail 🗆	Personal Delivery at the Casino		