

Please Email form to:
winloss@downstreamcasino.com
Or Mail form to:
Downstream Casino Resort
Attention: Accounting
69300 East Nee Road
Quapaw, OK 74363
Fax # (918) 919-6100



Win/Loss Statement and Tax Information Request Form

First & Last Name _____ Players Club Card # _____
Social Security Number _____ Date of Birth ____/____/____
Mailing Address _____ Apartment # _____
City _____ State _____ Zip _____
Telephone _____ Email if applicable _____

Please provide me with a statement of my activity for the tax year(s): _____

Check the documents you wish to receive:

- Win/Loss Statement (Players Club Card # Required for this Statement)
- W2G (Jackpot Winnings)
- 1099 Gaming (Promotional Winnings - Ex. Hot Seat Drawings, etc.)

I hereby certify that the information and statements contained herein are true and correct. I hereby authorize Downstream Development Authority DBA Downstream Casino Resort to provide me with the above checked statement(s). By signing below, I agree to release Downstream Development Authority DBA Downstream Casino Resort, its officers, directors, employees, and agents from and against any loss, cost, expense (including attorney's fees and costs), damages liability or claims of any kind. I agree to indemnify Downstream Development Authority DBA Downstream Casino Resort from and against any and all suits, causes of action, liabilities, costs, losses, damages, and attorney's fees and costs which I or my spouse, administrators, executors, agents, assignees or any third party may have arising out of or relating to this request.

I have executed this request at _____, _____
City State
on this _____ day of _____, 20_____.

Guest's Authorized Signature

If this form is not presented in person, the signature must be Notarized

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 20_____.

Notary Public

Please Print Legible to Read. Failure to do so may result in your request not being processed.