



REQUEST FOR COPIES

**Please allow 7 to 10 business days for processing.*

Win/Loss

W-2G

Patron Account #

Year Requesting

Last Name

First Name

Social Security #

Address

City

State

Zip Code

Phone

Customer Signature

Date

A COPY OF YOUR VALID ID IS REQUIRED TO PROCESS.

Please Choose One:

Hold for pick up

Please mail to above listed address