

Gaming History Request Form

Please Print			
Patron Name:			
Date of Birth:		Last 4 SS#:	
Phone #			
Player Club Card #:			
Address:			
City:			
the prior tax year.	nly for promo wins totali	ng over \$600/year) by the Casino Win/Loss	ŕ
Tax year requested:		_	
Please Mark one: N	Nailed:	Pick up @the Cage:	
	generated from an interi	y historical gaming activity. I und nal system and is not intended to l	
Patron Signature:		Date:	
• •	• , ,	niling of processed request forms will ted above, then it will be mailed to a	

Please note: NO forms will be given to any individual other than the party listed on the W2G/1042-S, unless that person is deceased. In that case, a death certificate copy must be presented along with proof that you are the

executor of the estate, the spouse of the deceased, or a beneficiary of an estate trust.