



JOLIET CASINO HOTEL

W-2G REQUEST FORM

~ Your W-2G Requested Copies Will Be Mailed To Your Address On File ~
To Help Us Serve You Better,
Please Verify That We Have Your Current Mailing Address Before Submitting Your Request

*Address changes can be made at the Total Rewards Center or
By visiting www.harrahs.com and logging on to Total Rewards to update your profile.*

Please Print

Patron Name: _____
FIRST NAME MIDDLE INITIAL LAST NAME

Date of Birth: _____ Social Security Number: - -
MM/DD/YY

Harrah's Total Reward Number:

Tax Year(s) Requested: _____

I request that Harrah's Operating Company, Inc. provide me copies of the requested W-2G's from Harrah's Joliet Casino Hotel. In consideration for this information, I hereby release Harrah's its parent and affiliated ("Harrah's") from any and all claims arising from or relating to the information and its release, and further agree to indemnify and hold those entities and persons harmless from any such claims. I understand that the information requested is generated from internal marketing systems and is not intended to be or take the place of my own records of my gaming activity. Harrah's makes no representation or warranty, express or implied, as to the accuracy of this information or its effectiveness as proof of losses.

Patron Signature: _____ Date: _____

Mail your form to: Harrah's Joliet Casino Hotel 151 N. Joliet Street Joliet IL 60432	OR	Fax your completed form to (815)-740-7888	OR	Bring your completed form to the Total Rewards Center
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**** PLEASE ALLOW 2 WEEKS FOR PROCESSING OF YOUR REQUEST****