

## **Document Request**

| I am requesting a cop W2G |                   | Win/Loss                |                                       |        |
|---------------------------|-------------------|-------------------------|---------------------------------------|--------|
| W25                       | 1033              |                         |                                       |        |
| Tax Year:                 |                   |                         |                                       |        |
| Player Card Number:       |                   |                         |                                       |        |
| Name:                     |                   |                         |                                       | -      |
| Address:                  |                   |                         |                                       | -      |
| Address:                  |                   |                         |                                       | -      |
| City                      |                   | State                   | Zip Code:                             | -      |
| Phone Number:             |                   | Email Address:          |                                       | -      |
| Signature:                |                   |                         |                                       | -      |
| Note: Request will no     | ot be processed v | without signature; Plea | se allow 7-10 business days for proce | essing |
| Please fill out and ret   |                   | B Connected at Valley   | Forge Casino Resort or scan and ema   | ail to |