

This is your place

GAMING ACTIVITY REPORT & W2-G REQUEST FORM

Please print all information clearly.

First Name	Mid	ddle	Last Name	
Street Address	City	State	Zip Code	
Last 4 Digits of SSN my	choice Accou	nt Number	Date of Birth (mm/dd/yyyy)	
Phone Number		Tax Y	ear(s) Requested	
Do you request a gaming activity Do you request a copy of your V	y report? V2-G(s)?	Yes No Ye Yes No Ye	ear(s) ear(s)	
	Acknow	ledgment		
I certify that the statements contained herein information requested above. I understand the Activity Report is not an accounting record	nat it is my own resp	oonsibility to maintain a	ccurate records of play that, the Gaming	
Signature (Required)			Date	
*Notary not required if form is requ	uested or presei	nted in person.		
State of:) ss		ed before me on this the	
		Notary	(Seal)	
Please complete the request for	m and return it	to:		
Cactus Petes		Preferred Delivery Method		
Attn: Gaming Activity Report 1385 Highway 93		Fax		
Jackpot, NV 89825 Phone Number: (775) 755-2321		Mail		

Fax Number: (775) 755-2796