

Please Return form to:
 Choctaw Casino and Resort
 Attention: Cage Accounting
 4216 S Hwy 69/75
 Durant, Ok 74701
 Phone: (580) 920-0160
 Fax: (580) 931-2739



Win/Loss or Tax Information Request Form

Name _____ / _____ <small style="text-align: center;">Last Name First Name</small>	Players Club Card # _____
Social Security Number _____	Date of Birth _____ / _____ / _____ <small style="text-align: center;">Month Day Year</small>
Mailing Address _____ <small style="text-align: center;">Street Address or P.O. Box</small>	Apartment Number _____
City _____	State _____ Zip _____
Telephone _____	E-Mail if applicable _____ @ _____

Please provide me with a statement of my activity for the tax year (s): _____

The following document (s): (Please Check): Win/Loss Statement W2G

**1099's can be requested after February 1st for the previous tax year. All requests must be sent to: Choctaw Nation of Oklahoma Finance Department
 Attn: Stacey Workman P.O. 1210 Durant, OK 74701**

I, _____, hereby certify that the information and statements contained herein are true and correct. I hereby
 (i.e.. Jane Doe)

authorize Choctaw Casinos to provide me with the above checked statement(s). By signing below, I agree to release Choctaw Casinos, its officers, directors, associates, and agents from any loss, cost, expense (including attorney's fees and costs), damages, liability or claims of any kind. I agree to indemnify Choctaw Casinos from and against any and all suits, causes of action, liabilities, costs, losses, damages, and attorney's fees and costs which I or my spouse, administrators, executors, agents, assignees or any third party may have arising out of or relating to this request.

Please provide a copy of your valid ID and your SSN (TIN) number, what applies

*If this Information is not obtained, then the request **will not** be completed*

Sites (Check all that apply-W2G's Only)

	Resort		Pocola Too		Atoka		Stringtown
	Durant Too		McAlester		BRD		Stringtown Too
	Idabel		McAlester Too		Broken Bow		Poteau
	Pocola		Grant		Broken Bow Too		Wilburton

 Casino Guest' s Authorized Signature

 Date

 Casino Associate Issuing Copies

 Date

Disclaimer

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DO NOT WRITE BELOW THIS LINE. FOR CHOCTAW CASINOS USE ONLY.

Identification Type Provided

Social Security

W-9

Photo Identification

 Verifier's Signature and Date