



W-2G STATEMENT REQUEST

Snoqualmie Casino guests can have their personal W-2G statements sent to them by mail. To receive your W-2G statement, please print and fill out this form. Your signature and all requested information are required for processing.

Fax or mail the completed form to:

FAX: 425-888-7997

MAIL: Snoqualmie Casino
Attn: W-2G Casino Audit
37500 SE North Bend Way
Snoqualmie, WA 98065

Please allow two business weeks for delivery. If you have any questions, please call 425-888-1234 and ask for *Win/Loss Questions*. Please fill in the details below **completely**:

I would like to request my W-2G(s) for the year(s) _____ from Snoqualmie Casino.

First Name: _____ Last Name: _____ Crescent Club #: _____

Mailing Address: _____

City: _____ State: _____ ZIP/Postal Code: _____

Telephone Number: (_____) _____ Fax Number: (_____) _____

Social Security Number: _____ - _____ - _____

Please Deliver Report Via:
(Choose one option only)

Mail - Mail Address: _____

Hold for pickup at Crescent Club.

Special Instructions (e.g. "Please call when ready"): _____

Signature: _____ Date: _____

PLEASE NOTE: You have attested that the signature affixed on the above line is one and the same person as the requester per the printed name above.

REMEMBER!

ALL FIELDS MUST BE COMPLETED IN ORDER FOR THE REQUEST TO BE PROCESSED.
WIN/LOSS STATEMENTS ARE AVAILABLE AT THE END OF JANUARY FOLLOWING THE YEAR END.

