

2024 W-2G/1099 Request Form

This is <u>NOT</u> a request for Win/Loss statement; this is a request for copies of IRS form W-2G/1099. For Win/Loss statement, please contact the Rewards Club at (951) 770-5741.

Current Name: First Name	M.I.	Last Name		
Former Name (Maiden): First Name	M.I.	Last Name		
Current Mailing Address: Apt/Space #				
City:			State:	Zip code:
Phone No.:		Alternate Phone No.:		
Player's Club ID #:		Driver's/ID/Passport No:		
Social Security No. (If no Club #):		Date of Birth:		

Delivery Method (Choose <u>ONE</u> only - No pick-ups):

☐ Mail to above address

Email Address (PLEASE PRINT LEGIBLY)

(Check Spam/Junk folder for email response)

IMPORTANT: Pechanga Resort and Casino (PRC) will not be held responsible for misdirected W-2G forms. The signature below releases PRC from all liability. PRC cannot release information to anyone other than to the original winner stated on IRS form W-2G/1099.

Signature of Winner_____

Date___

Regulatory Compliance Use Only RECEIVED DATE

COMPLETED DATE

Please mail this form to:Pechanga Resort & Casino, Attn: Regulatory Compliance
P.O. Box 9041; Temecula, CA 92589-9041
Fax to (951) 770-8941 or Email to: w2grequests@pechanga.com