



**GAMING ACTIVITY REPORT & W2-G REQUEST FORM**

*Please print all information clearly.*

\_\_\_\_\_  
First Name Middle Last Name

\_\_\_\_\_  
Street Address City State Zip Code

\_\_\_\_\_  
Last 4 Digits of SSN PENN Play Account Number Date of Birth (mm/dd/yyyy)

\_\_\_\_\_  
Phone Number Tax Year(s) Requested

Do you request a gaming activity report? Yes\_\_\_ No\_\_\_ Year(s) \_\_\_\_\_  
Do you request a copy of your W2-G(s)? Yes\_\_\_ No\_\_\_ Year(s) \_\_\_\_\_

**Acknowledgment**

I certify that the statements contained herein are true and correct, and hereby request that Penn Entertainment, Inc. provide me with the information requested above. I understand that it is my own responsibility to maintain accurate records of play, that the Gaming Activity Report is not an accounting record and is not appropriate for income tax reporting.

\_\_\_\_\_  
**Signature (Required)** **Date**

*\*Notary not required if form is requested or presented in person.*

State of: \_\_\_\_\_ )  
\_\_\_\_\_ ) ss Acknowledged before me on this the \_\_\_\_\_  
County of: \_\_\_\_\_ ) day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Notary  
(Seal)

Please complete the request form and return it to: Preferred Delivery Method  
Fax \_\_\_\_\_  
Mail \_\_\_\_\_

***Please Allow 2-4 Weeks for Processing Your Request.***