

Request for W2G and Win/Loss Statement

Submission of this form will provide both W2G and Win/Loss Statements and will be processed in the order they are received. Please allow 5 to 10 business days for your request to be processed and allow time for delivery through the United States Postal Service as we are unable to fax or email tax information.

Please fill out the Player Information and address completely and print legibly to help expedite the processing of your request. Win/Loss Statements are also available through "My World" at <u>www.moheganpa.com</u> (Momentum account number and PIN is required).

Current Tax Year Win/Loss and W2G Statements are not available or processed until after the end of the calendar year.

TAX YEAR REQUESTED					
Player Information					
Momentum Account Number:					
Last Name:	_First Name: _				
Street Address:					
City / State / Zip Code:		/	/		_
Phone: ()					
Social Security Number: _XXXXX					
Date of Birth:	_				
Signature:	D	ATE:	/	/	
Mohe Attention: Operat 128	ease return to: gan Pennsylva ional Accounti 0 Highway 31 s-Barre, PA 18	ing Depart 5	ment		
Request forms can be returned by fax: (57 check the status, call (3				tion is need	ed or

Thank you for playing at Mohegan Pennsylvania. We hope to see you back soon!

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