

**PURSE AUTHORIZATION FORM**

This is authorization is for – check all that apply:

OWNER EARNINGS

DRIVER EARNINGS

TRAINER EARNINGS

NAME(S) \_\_\_\_\_

List all owners on ownership; CHECKS WILL BE MADE PAYABLE WITH 'OR' BETWEEN EACH NAME unless otherwise requested

ADDRESS: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Social Security # \_\_\_\_\_

OR Federal ID# \_\_\_\_\_

use the number of the person who will be tax responsible & COMPLETE W-9 BELOW

Check One:

I want my checks MAILED to the address above

I want to PICK UP my checks.

➤ Name of another person authorized to pick up checks \_\_\_\_\_

*Checks for overnight races are released on a regular schedule WITHOUT being held until laboratory test clearance is received. If notified of a positive test by the PA Harness Racing Commission, owners and trainers are equally responsible to return the entire purse money earned. Refusal to return the amount within 30 days will result in suspension and further action.*

OWNERS—LIST THE NAMES OF HORSES UNDER THIS OWNERSHIP:

→ \_\_\_\_\_ ←

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Downs at Mohegan Sun Pocono, 1280 Hwy 315; Wilkes-Barre, PA 18702

Horsemen's Bookkeeper-Linda Segarra-Phone 570.831.2193 Fax: 570.823.9407

Email: [lsegarra@mohegansunpocono.com](mailto:lsegarra@mohegansunpocono.com)

RETURN

A full 4 page W-9 form can be obtained at [www.irs.gov](http://www.irs.gov)

Form <b>W-9</b> (Rev. October 2007) Department of the Treasury Internal Revenue Service	<b>Request for Taxpayer          Identification Number and Certification</b>	Give form to the requester. Do not send to the IRS.
*Name (as shown on your income tax return) _____		
Business name, if different from above _____		
Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, O=corporation, P=partnership) ▶ ..... <input type="checkbox"/> Other (see instructions) ▶ .....		<input type="checkbox"/> Exempt payee

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number	
OR	
Employer identification number	

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here	Signature of U.S. person ▶ _____	Date ▶ _____
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