



Tax Information Request Form

Date of Request: _____

Guest Requesting to Pick-Up Documentation Guest Requesting to have Documentation Mailed

Please Print:

Guest's Full Legal Name:

First Middle Int. Last

Players Club Account #: _____

DOB: _____ Last Four (04) Digits of Social Security #: _____

Current Mailing Address: _____

Phone Number: _____

Type of Correspondence: (Please Circle) Win/Loss Statement W2G 1099MISC

List Year(s) for Tax Forms You are Requesting: _____

Guest's Signature: _____

If Compliance is unavailable please mail form to:

Isleta Resort and Casino
Attention: Compliance Department
11000 Broadway SE
Albuquerque, NM 87105

Questions Please Call Compliance:

505-724-3995 Or 505-724-3951
505-724-3993 Or 505-724-3954
FAX 505-244-8238