

Attention: Corporate Finance 7002 Arundel Mills Circle Suite 7777 Hanover, MD 21076 Identification verified by: Team Member / Badge #

PLEASE CIRCLE ALL THAT APPLY: MARYLAND PENNSYLVANIA PLAY LIVE MANUAL REQUEST FOR TAX FORMS AND WIN/LOSS STATEMENT Please allow up to 15 business days for receipt via USPS. ***If you are mailing in your request, please DO NOT forget to notarize the document at the bottom*** Tax Year(s) Requested (Circle): 2013 2014 2015 2016 2017 2018 2019 2020 Player information (please write legibly):			
Last Name	First Name	Middle Initial	Suffix
	rity Number: xxx-xx		r (REQUIRED)
Please Circle: MAIL Pl	CKUP (Only available at l	elephone Number: () _ MD Live Casino)	[_]
Address to mail reques	ted documents (please w	rite legibly)	
Street Address (including	g Apt#) or P.O. BOX		
City, State, and Zip Code	2		
Signature:			
Notary – Certificate of A	Acknowledgement – (For		
State/County of:		, before me on: (Notary Date)	
Personally appeared,			,
	(Signers)		
name(s) is/are subscribe	d to the within instrument	and acknowledged to me	idence to be the person(s) whose e that he/she/they executed the e(s) on the instrument the person(s

or the entity upon behalf of which the person(s) acted, executed the instrument

WITNESS my hand and official seal

(Notary signature and Seal)

W/L Statements for the last three tax years are available via your account at philadelphia.livecasinohotel.com/myliverewards-portal