



2025 W-2G/1099 Request Form

This is **NOT** a request for Win/Loss statement; this is a request for copies of IRS form W-2G/1099.
For Win/Loss statement, please contact Pechanga Rewards at (951) 770-5741.

Current Name: First Name	M.I.	Last Name	
Former Name (Maiden): First Name	M.I.	Last Name	
Current Mailing Address:			Apt/Space #
City:		State:	Zip code:
Phone No.:		Alternate Phone No.:	
Player's Club ID # :		Driver's/ID/Passport No:	
Social Security No. (If no Club #):		Date of Birth:	

Delivery Method (Choose **ONE** only - *No pick-ups*):

- ☐ **Mail to above address**
- ☐ **Email Address (PLEASE PRINT LEGIBLY)**

(Check Spam/Junk folder for email response)

IMPORTANT: Pechanga Resort and Casino (PRC) will not be held responsible for misdirected W-2G forms. The signature below releases PRC from all liability. PRC cannot release information to anyone other than to the original winner stated on IRS form W-2G/1099.

Signature of Winner _____ Date _____

Regulatory Compliance Use Only
RECEIVED DATE

COMPLETED DATE

Please mail this form to: Pechanga Resort & Casino, Attn: Regulatory Compliance
P.O. Box 9041; Temecula, CA 92589-9041
Fax to (951) 770-8941 or Email to: w2grequests@pechanga.com