



CASINO HOTEL
BATON ROUGE

GAMING ACTIVITY REPORT & W2-G REQUEST FORM

Please print all information clearly.

First Name Middle Last Name

Street Address City State Zip Code

Last 4 Digits of SSN mychoice Account Number Date of Birth (mm/dd/yyyy)

Phone Number Tax Year(s) Requested

Do you request a gaming activity report? Yes___ No___ Year(s) _____
Do you request a copy of your W2-G(s)? Yes___ No___ Year(s) _____

Acknowledgment

I certify that the statements contained herein are true and correct, and hereby request that L'Auberge Baton Rouge provide me with the information requested above. I understand that it is my own responsibility to maintain accurate records of play that, the Gaming Activity Report is not an accounting record and is not appropriate for income tax reporting.

Signature (Required) **Date**

**Notary not required if form is requested or presented in person.*

State of: _____)
County of: _____) ss

Acknowledged before me on this the _____
day of _____, _____

Notary (Seal)

Please complete the request form and return it to: Preferred Delivery Method
L'Auberge Casino Hotel Baton Rouge
Attn: Gaming Activity Report
777 L'Auberge Avenue
Baton Rouge, LA 70820
Phone Number: (225) 215-7777
Toll Free: (866) 261-7777
Pick-up _____
Mail _____

Please Allow 1-3 Weeks for Processing Your Request.