





12375 N. Highway 77 | Newkirk, OK 74647 (580) 628-2624 Ext. 1226 or 1222

W2G/1099 Request Form

Please Select All That Apply:	Please Select All That Apply:	
☐ W2G	☐ Native Lights Casino	
1 099	☐ Tonkawa Hotel and Casino	
	Tonkawa Gasir	10
Name:	SSN#:	
Address:		
City:	State:	Zip:
Home Phone: ()	Cell Phone: ()	
Years Requesting:		
Also include a copy of	f Driver's License or St	ate ID
I request that Tonkawa Gaming provide consideration for this information, I h Native Lights Casino, Tonkawa Gasino companies, and all of their respective employees, representatives and agents f the information and its release, and fur and persons harmless from any such cused for W2G/1099 requests. If I requ Win/Loss Statement form with the requ that form.	ereby release the Tonkavo, Tonkawa Hotel & Casirowners, officers, directors from any and all claims arise ther agree to indemnify a claims. I also understand ire a Win/Loss Statement	wa Tribe of Oklahoma, no and their affiliated, managers, members, sing from or relating to nd hold those entities that this form is only, I agree to submit a
Signature:		

Please Remit To One of the Following:

Tonkawa Enterprises
Accounting Tax Information
P.O. Box 220
Tonkawa, OK 74653

Native Lights Casino
ATTN: Brenda Mooney
P.O. Box 507
Tonkawa, OK 74653
Email: taxinfo@tonkawagaming.com

Tonkawa Casinos ATTN: Abigail Webster P.O. Box 220 Tonkawa, OK 74653 Email: taxinfo@tonkawagaming.com