

Year(s) Requested			
2015		2016	
2017		2018	
2019		2020	

presque isle
downs & casino

ANNUAL ACTIVITY REQUEST FORM

FOR OFFICIAL USE ONLY

Date Sent: ___ / ___

Sent By: _____

Verified By: _____

Mail Statement	Instructions:
Fax Statement	PickUp Date, Fax #, Etc. Please Allow 2 Weeks
Pick-Up Statement	

To request an Annual Activity Report, please fill out as much of the following information and return to us.

MAIL: Presque Isle Downs & Casino
Win / Loss
PO Box 10728
Erie, PA 16514

FAX:
(814) 860 - 3390

**Drop Off And
Pick Up At
Guest Services
At Anytime**

Requests for Annual Activity Reports will be processed in the order in which they are received and verified.
PLEASE ALLOW UP TO 2 WEEKS FOR PROCESS AND DELIVERY.

All Annual Activity Reports will be mailed to the address recorded on file.
Please ensure the address on your account, and any other information, is correct before submitting your request.

The information on this form is required for identification and security purposes.
Incomplete forms or incorrect information may cause delays. All fields are required.

Today's Date: _____

(- Requests For Current Tax Year **WILL NOT** Be Processed Until The End Of The Year -)

Player Card Number: _____

First & Last Name: _____

Mailing Address: _____

Social Security #: _____

Date of Birth: _____

Driver's License / ID #: _____

Please Specify State or
Province Issued

Phone Number: _____

E-Mail Address: _____

Signature: _____

If you have any questions, or need help, call **(814) 860 - 8999 !**

If you or someone you know has a gambling problem, help is available. Call **1-800-GAMBLER.**