

CASINO WINNINGS WORKSHEET

Please complete this entire form. This will assist us in providing you a quick and accurate evaluation and quote.

When completed, please fax to **888.283.3218**.

Winnings Contact Information

Name:

Address 1:

Address 2:

City:

State:

Zip:

Home Phone:

Work Phone:

Fax:

Email:

Winnings Information

Win Date:

Were you the only winner?: Y or N

Gross Amount Won:

Gross Annual Payment:

What is the Net Annual Payment:

What state was the prize won in?:

Comments: