

Request for Gaming Information

Name and Address	Permit Number
	Daytime Phone Number
	Email Address

What information are you requesting? Be specific as to what forms (or portion thereof) and what time period you are interested in. Delays will occur if it is not clear what information you desire.

In accordance with 2 AAC 96.360(a), I understand that I must pay a fee of \$0.25 per page for this service. If the time required to search out and copy documents for a single requester exceeds five hours in a calendar month, the department is authorized to charge the requester an hourly rate equal to the searcher's hourly rate plus benefits for those hours in excess of five hours. If the time required to search out and copy documents for a single requester exceeds a single employee's work hours in a calendar month, the department is authorized to charge the full salary costs of the searcher. I understand that once the research has been performed and the copies have been made, gaming personnel will contact me and I must send in payment for these services before I can receive the copies. All requests are processed on a first come, first served basis. Please allow 4 to 6 weeks processing time.

I have read the above statement and by my signature below, agree to and authorize the Tax Division to perform a search for the information that I have requested.

Requestor Signature	Requester Printed Name	Date
---------------------	------------------------	------

DEPARTMENT USE ONLY
Date Received
Date Processed