



2010 OFFICIAL TOURNAMENT FINISH AFFIDAVIT

This form must be postmarked within 30 days after the qualifying Phoenix "First Flight" tournament date.

I _____ hereby attest that I finished 1st place in the
(Print participants name)

Phoenix "First Flight" authorized event _____
(Print the tournament name and number of boats)

(Print tournament location city and state) (Print website address)

Signature of Participant _____ Date of Event _____

Name of Tournament Director _____ Ph # _____

By submitting this form along with a W-9 for payment in the Phoenix "First Flight" Contingency program, I further acknowledge that I have met all the guidelines as required per the official rules posted at www.phoenixfirstflight.com. I have met both, clothing and decal requirements, as well as fished from my Phoenix boat during the competition.

PLEASE PRINT NAME

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____

ZIP: _____ PHONE NUMBER: _____

EMAIL: _____

PLEASE FILL OUT ABOVE FORM WITH SIGNATURE AND SUBMIT ALONG WITH COMPLETED W-9 (see page 2) TO:

PHOENIX BOATS
ATTN: JEFF HARTUNG
210 INDUSTRIAL BLVD
TULLAHOMA, TN 37388

22222		a Employee's social security number		OMB No. 1545-0008					
b Employer identification number (EIN)			1 Wages, tips, other compensation		2 Federal income tax withheld				
c Employer's name, address, and ZIP code			3 Social security wages		4 Social security tax withheld				
			5 Medicare wages and tips		6 Medicare tax withheld				
			7 Social security tips		8 Allocated tips				
d Control number			9 Advance EIC payment		10 Dependent care benefits				
e Employee's first name and initial		Last name		Suff.		11 Nonqualified plans		12a C o d e	
						13 Statutory employee	Retirement plan	Third-party sick pay	12b C o d e
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f Employee's address and ZIP code						14 Other		12c C o d e	
								12d C o d e	
15 State	Employer's state ID number		16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name		
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Form **W-2** Wage and Tax Statement

2010

Department of the Treasury—Internal Revenue Service

Copy 1—For State, City, or Local Tax Department