

Request for Duplicate Tax Forms

Please complete the following form and provide all of the requested information. The form is provided in a fill-in format. After the form is completed, please print and sign it. The form can be mailed, faxed, or scanned and emailed to us. Please allow 7 - 10 days to receive your Duplicate Tax Forms in the mail. Our contact information is as follows:

FAX: 218-878-2411

Email: bbcrtaxrequest@fdlband.org

MAIL: Black Bear Casino Resort

Attn: Accounting

Internal Use: Date of Report_

	1785 Hwy 210 / P.O. E Carlton, MN 55718	Box 777 Phone:	1-888-771-0777
Players Club Mei	mber Name:		
Players Club Acco	ount Number:		
Calendar Year(s)	Requested (Ex 2018, 2019	9):	
Mailing Address	:		
City	Ste	ate	Zip
Last four (4) numbers of your Social Security number:			
Phone:			
Resort furnish me use. I understand my personal Black of Lake Superior (with a Duplicate Tax For the figures contained in & Bear Casino Resort Play	m for the calendar ye the form is only that o yers Club card. I here	nippewa, d/b/a Black Bear Casino ear(s) listed above for my personal of which was recorded while utilizing eby agree to hold the Fond du Lac Band armless of any errors that may
By executing this document I verify that I am the primary account holder. I understand that falsifying my identity is a fraudulent act and is punishable by law. Incomplete, illegible requests will not be fulfilled.			
Member Signatu	re	Date	

_Initials of Rep_____

_Form Updated: 4/17/19