

Request for Win-Loss Statement

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. Our contact information is as follows:

MAIL:	Black Bear Casino Attn: Players Club 1785 Hwy 210 / F Carlton, MN 5571	2.O. Box 777	FAX: 218-878-2418 Email: winloss@fdlband.org Phone: 1-888-771-0777
Players Club Member Name:			
Players Club Account Number:			
Calendar Year(s) Requested (Ex 2018, 2019):			
Mailing Address:			
City	S	tate	Zip
Email reply: YES	NO		

Phone:

Email address:

I hereby request that the Fond du Lac Band of Lake Superior Chippewa, d/b/a Black Bear Casino Resort furnish me with a Win-Loss Statement for the calendar years listed above for my personal use. I understand the figures contained in the statement may not be indicative of my complete gaming win and or loss and is only that of which was recorded while utilizing my personal Black Bear Casino Resort Players Club card. I hereby agree to hold the Fond du Lac Band of Lake Superior Chippewa, d/b/a Black Bear Casino Resort harmless of any errors that may be contained within the requested statement.

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 Signature

Date

Internal Use: Date of Report Initials of Rep_ _Form Updated: 4/17/19