



# Kewadin Casinos Request for Win – Loss Statement

***\*\*Please print the below information\*\****

Requesting statement for tax year: 20\_\_\_\_\_

Northern Rewards Players Club number: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day time phone number: \_\_\_\_\_

Evening phone number: \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Drivers license : \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## IMPORTANT INFORMATION REGARDING YOUR REQUEST

- All of the above information is required. Incomplete forms will not be processed.
- Please allow 3 weeks for processing.
- End of year requests will be mailed after January 15.
- Statement will be mailed to the address above.
- All questions may be directed to 800-KEWADIN (539-2346) ext. 53700.
- Request forms may be faxed to 906-635-4959 to the attention of Kristen Cloudman.
- Request forms may be returned to any Northern Rewards Club booth.
- Request forms may be mailed to: Northern Rewards Club, Attn: Kristen Cloudman, 2186 Shunk Road, Sault Ste. Marie, MI 49783.
- Statement is based on carded play.
- If above information does not match Northern Rewards account, we will contact you before statement is mailed. If we can not contact you due to inaccurate information, your form will not be processed.

### **For Internal Use Only**

Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date Mailed: \_\_\_\_/\_\_\_\_/\_\_\_\_

Prepared by: \_\_\_\_\_