

As a courtesy, North Star Mohican Casino Resort offers a recent win/loss statement to customers. However,

Dear Player:

your request for information, please co	mplete this form and mail it ba	in/loss tax information. In order to fulfil ck. Upon receipt of your completed form ing at North Star Mohican Casino Resort.
•		, request the
following information from the North S	Star Mohican Casino Resort:	, 1040000 000
Please note 2024 requests will not be for statements to be processed.	pe processed until January 20	25, allow up to 3 weeks from January 1st
Casino Bingo		DuplicateW2G
(please place an x in all boxes you seek inform	ation from)	
Win/Loss Statement for year: (please indicate which year(s) you seek inform)
Please Select Delivery Method:	Mail	Email
Mailing Address:		
City:	State:	Zip:
Email:	Phone Number	
Star Club Card Number:		
Social Security Number:		Birth Date:/
Signature:		Date:/

North Star Mohican Casino Resort Star Club is not responsible for any errors or misinformation included in this report. By signing this request form, I agree that I am the primary account holder and have the right to receive this information.

I understand that the information included on this report may not be complete with all gaming activity since only activity recorded while using the Star Club account card above is available.

You may email this form to Tabatha. Hoffman@northstarcasinoresort.com. Otherwise, print and mail back attention Tabatha Hoffman, Marketing Clerk, W12180 County Road A Bowler, WI 54416.