



# WIN/LOSS STATEMENT REQUEST

Snoqualmie Casino guests can have their personal win/loss statements sent to them by mail. To receive your win/loss statement, please print and fill out this form. Your signature and all requested information are required for processing.

Fax or mail the completed form to:

**FAX:** 425-888-7997

**MAIL:** Snoqualmie Casino  
Attn: Crescent Club  
37500 SE North Bend Way  
Snoqualmie, WA 98065

Please allow two business weeks for delivery. If you have any questions, please call 425-888-1234 and ask for *Win/Loss Questions*.

Please fill in the details below **completely**:

I would like to request my Win/Loss(s) for the year(s) \_\_\_\_\_ from Snoqualmie Casino.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Crescent Club #: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP/Postal Code: \_\_\_\_\_

Telephone Number: (\_\_\_\_\_) \_\_\_\_\_ Fax Number: (\_\_\_\_\_) \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Please Deliver Report Via:  Mail - Mail Address: \_\_\_\_\_

Email as PDF file - Email Address: \_\_\_\_\_

Hold for pickup at Crescent Club.

Special Instructions (e.g. "Please call before faxing"): \_\_\_\_\_

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

**PLEASE NOTE:** You have attested that the signature affixed on the above line is one and the same person as the requester per the printed name above.

**REMEMBER!**

**ALL FIELDS MUST BE COMPLETED IN ORDER FOR THE REQUEST TO BE PROCESSED.  
WIN/LOSS STATEMENTS ARE AVAILABLE AT THE END OF JANUARY FOLLOWING THE YEAR END.**