

LG623 Manufacturer to Distributor Sales Agreement for Pull-tab Dispensing Device

Manufacturer Information			
Manufacturer _____		License number MA _____	
Street address _____		City _____	State _____ Zip _____
Distributor Information			
Distributor _____		License number DI _____	
Street address _____		City _____	State _____ Zip _____
Pull-tab Dispensing Device Description			
<input type="checkbox"/> New	<input type="checkbox"/> Used	Date of manufacture _____ Model number _____ Serial number _____	
Terms and Conditions of Sale			
Price of pull-tab dispensing device (as reported on the pricing report): \$ _____			
Sales tax:		\$ _____	
TOTAL:		\$ _____	
Annual cost of maintenance agreement, if any. Attach copy of maintenance agreement.		\$ _____	
Total cost paid by buyer due and payable within 30 days of receipt:		\$ _____	
Other _____			

Governing Laws and Venue			
This sales agreement shall be interpreted according to the laws of the state of Minnesota. Repossession effected through legal process shall be governed by the laws of the state of Minnesota. The venue for legal proceedings regarding this sale shall be St. Paul, Minnesota.			
Manufacturer signature _____		Distributor signature _____	
Print name _____	Title _____	Print name _____	Title _____
Date _____		Date _____	
Mail a copy of this sales agreement and the sales invoice within ten days of the sale to: Gambling Control Board Suite 300 South 1711 West County Road B Roseville, MN 55113		Questions on this form should be directed to the Gambling Control Board at 651-639-4000. This publication will be made available in alternative format (i.e. large print, Braille) upon request. Data privacy notice: The information requested on this form and any attachments will become public information when received by the Board, and will be used to determine your compliance with Minnesota statutes governing lawful gambling activities.	