



**MISSOURI GAMING COMMISSION  
 CHARITABLE GAMES DIVISION  
 PO BOX 1847  
 JEFFERSON CITY MO 65102**

**REQUEST TO DISCONTINUE SALES OF PULL-TAB DEAL**

BINGO ORGANIZATION NAME AND ADDRESS	BINGO LICENSE NUMBER

**1. Have the top tier prizes been awarded?**       Yes       No

If you answered no, you may **NOT** discontinue the sale of this pull-tab game unless the pull-tabs are unusable due to damage. If unusable due to damage, complete the information below and explain in number 2.

If you answered yes, provide the following information about the pull-tab deal:

Deal 1

Deal 2

	Deal 1	Deal 2
A. Name of pull-tab		
B. Cost per tab		
C. Serial number		
D. Supplier's name		
E. Manufacturer's name		
F. Total prize amount offered		
G. Number of pull-tabs in the deal		
H. Invoice date (Purchase date)		
I. Total prize amount awarded		
J. Number of unsold pull-tabs		

**2. Provide the reason for requesting to discontinue the sale of each pull-tab deal.**

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SIGNATURE \_\_\_\_\_ DAYTIME PHONE # \_\_\_\_\_ DATE \_\_\_\_\_

**INSTRUCTIONS:**

Mail the completed form to the Missouri Gaming Commission, Bingo Division, P. O. Box 1847, Jefferson City, MO 65102. The form will be approved or disapproved and returned to your organization. **If approved, the approval form should be retained for a period of two years.** If disapproved, you may **not** discontinue sales of this pull-tab deal. You may request approval of two games on each 'Request to Discontinue Sales of Pull-Tab Deal' form. If you have any questions concerning the completion of this form or if you need additional forms, please contact our office at the address above or telephone 573-526-5370 or toll free 866-801-8643. You may fax your request to 573-526-5374.

**FOR COMMISSION USE ONLY**

<input type="checkbox"/> APPROVED  <input type="checkbox"/> DISAPPROVED	COMMENTS _____  SIGNATURE _____ DATE _____
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