# LG623 Manufacturer to Distributor Sales Agreement for Pull-Tab Dispensing Device

## Manufacturer Information

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<th>Manufacturer</th>
<th>License Number</th>
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## Distributor Information

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<th>License Number</th>
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## Pull-Tab Dispensing Device Description

- New [ ] Used [ ]
- Date of Manufacture: __________
- Model No.: __________
- Serial No.: __________

## 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

__________________________  _______________________
Date

## Distributor Signature

__________________________  _______________________
Date

## 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.

This publication will be made available in alternative format (i.e. large print, braille) upon request.

Mail a copy of this sales agreement and the sales invoice within ten days of the sale to:

Minnesota Gambling Control Board
Suite 300 South
1711 West County Road B
Roseville, MN 55113

Questions on this form should be directed to the Minnesota Gambling Control Board at 651-539-1900.