



# Request for Liquor Tasting Event Discount

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

Name of Event: \_\_\_\_\_

Event Organizer: \_\_\_\_\_

Event Organizer e-mail address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Event Location: \_\_\_\_\_

Number of anticipated Liquor Partners participating: \_\_\_\_\_

Event Date(s): \_\_\_\_\_ Times: \_\_\_\_\_

Event Date(s): \_\_\_\_\_ Times: \_\_\_\_\_

Event Date(s): \_\_\_\_\_ Times: \_\_\_\_\_

Occasional Permit:        OR    Licensee:

Licensee Name: \_\_\_\_\_ Licensee #: \_\_\_\_\_

Describe the Event: \_\_\_\_\_

# of attendees: \_\_\_\_\_

Who is the beneficiary of proceeds, if any?: \_\_\_\_\_

MBLL Approved by: \_\_\_\_\_