

DIVISION OF ALCOHOL AND TOBACCO CONTROL KEG REGISTRATION IDENTIFICATION FORM



Missouri state law requires any individual purchasing at retail a container or keg having the capacity of four or more gallons of beer, wine, or intoxicating liquor to sign this form and requires the retailer to complete it and to require from the purchaser a valid and positive identification. Any non-returnable container with a capacity of less than six gallons shall not be considered a keg under this section. The retailer must retain this form with the keg tags for a minimum of three months following the sale of the keg. (Section 311.082, RSMo)

Name of Purchaser (Print)	Address		
City	State	Zip Code	Phone Number
Form of Identification Shown	Date of Birth		Identification Number

Purchaser Attestation: I am at least 21 years of age and I understand that alcoholic beverages are being purchased under this receipt. I understand that purchasing alcoholic beverages by a person less than 21 years of age and, with certain limited exceptions, the furnishing of alcoholic beverages to a person less than 21 years of age are violations of Section 311.310, RSMo. **I understand and acknowledge that such violations, or any misuse of a keg or its contents, may result in criminal prosecution, civil liability, or both.** I understand that it is unlawful to resell this product, and that my deposit will not be refunded if I return the keg without the label and identification number intact and legible.

Signature of Purchaser	Date
Number of keg(s) sold to the above individual	Total Keg/Container Deposit Amount
Name of Employee Making Sale	Date of Sale
Retail Business Name	Liquor License Number

Complete a Box for Each Keg Purchased	_____	_____	_____	_____
	Keg ID Number	Keg ID Number	Keg ID Number	Keg ID Number
	\$ _____ (Deposit)	\$ _____ (Deposit)	\$ _____ (Deposit)	\$ _____ (Deposit)
	_____ gallons (keg size)	_____ gallons (keg size)	_____ gallons (keg size)	_____ gallons (keg size)

TO BE FILLED OUT AFTER KEG IS RETURNED

<u>Label Intact</u> (Yes/NO)_	<u>Deposit Returned</u>	<u>Date Keg Returned</u>	<u>Employee Receiving Keg</u>
ID # _____	\$ _____	___/___/___	_____
ID # _____	\$ _____	___/___/___	_____
ID # _____	\$ _____	___/___/___	_____
ID # _____	\$ _____	___/___/___	_____