

## Missouri Department of Public Safety Division of Alcohol and Tobacco Control

## **Alcohol Compliance Buy - Minor Information and Consent**

| State of Missouri  |  |                    |                           |
|--|--|--------------------|---------------------------|
| COUNTY of)   |  |                    |                           |
| Before me, the undersigned authority, on this  | day of   | , 20               | , personally appeared     |
|  | who by me is known and who after being by m        | ne first duly swor | n did depose and state:   |
| I am   | , a minor, and was born on the                     | day of             | , 20                      |
| My address is  |  |                    | <del>-</del>              |
| My driver's license number is  | in the State of                                    |                    | <del>.</del>              |
| My Social Security number is   |  |                    |                           |
| My parents'/legal guardians' names are   |  |                    |                           |
| My home telephone number is  |  |                    | <del>.</del>              |
| I do hereby agree to assist the  | in the inves                                       | tigation of offen  | ses involving the         |
| unlawful sale of intoxicating liquor products in this  | state. I understand that I will be entering locati | ons, in which int  | oxicating liquor products |
| are sold and that I will attempt to purchase intoxical   | ating liquor but only under the direction and su   | pervision of age   | nts of the                |
| I understand that I may wear an audio recording or attempting the purchase of intoxicating liquor prod |  |                    |                           |
| activities during these attempts.  |  |                    |                           |
| I understand and agree that I may be required to a   | ppear and testify in court and/or in an administ   | rative proceedin   | g concerning the          |
| purchase of intoxicating liquor products or other cr   | iminal or administrative violations and that said  | d appearance an    | d testimony may be        |
| required in Jefferson City or another location in this   | s state.   |                    |                           |
|  |  |                    |                           |
| Signature  |  |                    |                           |
| Drint Namo   | -  |                    |                           |
| Print Name Sworn to and subscribed before me this  | day of   |                    | , 20 .                    |
| Sworn to and subscribed before the this  | ady of   |                    |                           |
| Notary Public  | _  |                    |                           |

**MO 829-A0136** Revised: 12/01/2020 Page 1 of 1