



Kansas Department of Revenue  
Alcoholic Beverage Control Division  
915 S.W. Harrison Street  
Topeka, KS 66625-3512  
Phone: 785-296-7015 Fax: 785-296-7185

## REQUEST FOR APPROVAL OF MIXED ALCOHOLIC LIQUOR SERVED IN PITCHERS

**Who may complete this form?**

Any on-premise licensee seeking approval from the Director for the sale and service in a pitcher of mixed alcoholic beverages that are not currently approved may complete and submit this form to the address or fax number above to request approval from the Director of ABC.

List only one type of mixed alcoholic beverages per request.

If the request is approved, it will be posted to our website at <http://www.ksrevenue.org/abconprem.html>

LICENSEE INFORMATION:		
Licensee Name	License No.	
Licensee Mailing Address	City	Zip
Contact Person Name	Email Address	
Phone Number	Fax Number	
Requested By Name (please print)		
PITCHER INFORMATION: (Enter the name of the mixed beverage and description, if any, in the space below).		

\_\_\_\_\_

Authorized Signature

\_\_\_\_\_

Date

**ABC Office Use Only**

<input type="checkbox"/> APPROVED  <input type="checkbox"/> DENIED	Signature of ABC Director	Date
Notified by <input type="checkbox"/> Email <input type="checkbox"/> mail <input type="checkbox"/> fax		
Approved Pitchers Only: <input type="checkbox"/> Posted to ABC Website		