



UTAH DEPARTMENT OF ALCOHOLIC BEVERAGE SERVICES

POST-EVENT FINANCIAL INFORMATION

IMPORTANT: The information must be completed for each event and returned to DABS.

Entity/Organization Name: _____

Event Name: _____

Event Permit number: _____ Event Date(s): _____

Phone number: _____

Person to contact: _____

The information below must be supplied to the Utah Department of Alcoholic Beverage Services before you may receive a refund of your compliance bond and before you may apply for another event.

Please contact the Licensing & Compliance Division at (801) 977-6800 or through you online account with any questions.

Receipts:

Admission fees _____
Sales - alcoholic beverages _____
Sales - other _____

Total receipts: _____

Purchases:

Beer _____
Liquor _____
Food _____
Other _____

Total purchases: _____

Net proceeds: _____

Keep cash bond on File with DABS

Please refund cash bond to: _____

Address City State Zip

Signature: _____

Date: _____