BUREAU OF BUSINESS TRUST FUND TAXES
MISCELLANEOUS TAX DIVISION
SMALL GAMES OF CHANCE
PO BOX 280906
HARRISBURG, PA 17128-0906

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF REVENUE

REV-915 (01-05)

PENNSYLVANIA SMALL GAMES OF CHANCE
GAME APPROVAL FORM

MANUFACTURER INFORMATION

1. NAME OF MANUFACTURER: _____
2. LICENSE #: _____
3. CONTACT PERSON: _____ PHONE #: _____ FAX#: _____
4. ADDRESS (CONTACT PERSON): _____

THE FOLLOWING INFORMATION IS NEEDED TO SUBMIT A GAME FOR APPROVAL:

GAME INFORMATION

NAME OF GAME:	
FORM/BOARD NUMBER(S):	
DESCRIPTION OF THE GAME AND RULES FOR PLAY:	
GAME PRIZE STRUCTURE, PRIZES AND THEIR VALUE:	
NUMBER OF CHANCES AND COST PER CHANCE:	
PAY OUT %:	

USE 8 1/2 X 11 SHEET(S) OF PAPER TO PROVIDE ADDITIONAL INFORMATION

ATTACH A PICTURE OR ILLUSTRATION OF THE GAME AND ITS COMPONENT PIECES

NOTE: ALL INFORMATION MUST BE COMPLETED OR REQUEST WILL BE DENIED

THE SIGNATURE AND DATE BELOW CERTIFIES ALL INFORMATION SUBMITTED HEREIN IS TRUE AND CORRECT.

SIGNATURE: _____ DATE: _____