



# Illinois Liquor Control Commission

## Request for One-Time Transfer of Alcoholic Liquor

### Retail to Retail

**XFER-100**

*This form shall be submitted to the Illinois Liquor Control Commission ([ILCC@illinois.gov](mailto:ILCC@illinois.gov)) PRIOR to conducting any transfer referenced herein. Transfers are not authorized unless approved by the Illinois Liquor Control Commission*

To: Illinois Liquor Control Commission  
From: \_\_\_\_\_  
Email: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Today's Date: \_\_\_\_\_  
Reason for Request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pursuant to Section 100.250 of the ILCC Rules and Regulations, please consider this request to allow the one-time transfer of alcoholic liquor between the licensed premises listed below. Attached please find a detailed inventory of the alcoholic liquor products to be transferred.

The transfer is scheduled to occur on \_\_\_\_\_

**FROM:** Store: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
STATE LIC. NO.: \_\_\_\_\_

**TO:** Store: \_\_\_\_\_ Store: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
STATE LIC. NO.: \_\_\_\_\_ STATE LIC. NO.: \_\_\_\_\_

***A detailed inventory must be included with this form.***

The inventory must include locations ("to" and "from"), the product brand name(s), container sizes, and number of containers. Email inventory detail and this request to: [ILCC@Illinois.gov](mailto:ILCC@Illinois.gov), or send by regular mail to: ILCC, 50 W Washington, Suite 209, Chicago, IL 60602.