

CITY OF MONTGOMERY

Mailing Address:
P.O. BOX 830469
BIRMINGHAM, AL 35283-0469

Date: _____

City Acct. No.: _____

WINE TAX REPORT

NAME OF FIRM _____

ADDRESS OF FIRM _____

FOR MONTH OF _____ 20 _____

NOTE: ALL COMPUTATIONS WILL BE BY NUMBER OF LITERS PROCESSED AND SOLD

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1. INVENTORY BEGINNING OF MONTH _____
 2. RECEIVED DURING MONTH _____
 3. TOTAL INVENTORY DURING MONTH (LINES 1 + 2) _____
 4. INVENTORY END OF MONTH _____
 5. TOTAL SOLD DURING MONTH (LINE 3 MINUS LINE 4) _____
 6. SALES OUTSIDE CITY _____
 7. MILITARY SALES _____
 8. OTHER EXEMPTIONS _____
 9. TOTAL EXEMPTIONS (TOTAL LINES 6, 7 AND 8) _____
 10. TAXABLE SALES (LINE 5 MINUS LINE 9) _____
 11. TAX DUE (LINE 10 MULTIPLIED BY .07) _____
 12. PENALTY* _____
 13. TOTAL AMOUNT DUE CITY (REMIT WITH RETURN) _____
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Please make check payable to
THE CITY OF MONTGOMERY
**Due on or before 20th of month
following purchases.**

I hereby certify that the foregoing is a full and true report as stated.

***Late filing fee of greater amount of \$50
or 10% of tax liability will be assessed in
accordance with Ord.# 19-93 for returns
filed after the 20th of month following
month of collection.**

Firm _____

By _____