



MONTANA
 BET-2
 New 09-07

Beer Retailer Monthly Report For Purchases from a Brewery Located Outside of Montana

Month Ending			Year	
Retailer Name			License No.	
Address				
<small>Street</small>	<small>City</small>	<small>State</small>	<small>Zip Code</small>	
Phone			FAX	

This report is for the preceding month and is due the 15th of each month. All records, invoices and delivery records must be kept for inspection by the Department of Revenue.

Beer Merchandise Purchased					
Invoice Date	Supplier	Supplier License No.	Brand	Invoice No.	Barrels

Total Barrels _____

Return to: Montana Department of Revenue
 Liquor Control Division
 P O Box 1712
 Helena, MT 59624-1712

I certify the above is true and correct.

Signed _____

Title _____