

TRADE NAME:

correct, and complete.

NONRESIDENT MANUFACTURER'S REPORT

Monthly Report of Beer Shipped into the State of Texas

LICENSE NUMBER: BS

| | TABC USE ONLY | | | | | | |
|----|---------------|--|--|--|--|--|--|
| EI | NTRY | | | | | | |
| С | HECKED | | | | | | |

FORM C-231 (04/05)

During the Month/Year of:

REPORT IS DUE ON THE 15TH DAY OF THE MONTH FOLLOWING EACH REPORTING PERIOD

| STATE: | | ZIP CODE: | | | | PHONE N | IMDED. | | | | |
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| | | | BARRELS | | | | | (B)=Bottles (C)=Cans | | | |
| DISTRIBUTOR | CITY | BRAND | 1/2 BBL. | 1/4 BBL. | 12/32 (B) | 24/12 (B) | 24/16 (C) | 24/12 (C) | | | |
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| | | TOTAL | | | | | | | | | |
| | | | TOTAL | TOTAL | TOTAL | TOTAL | TOTAL | TOTAL | TOTAL | TOTAL | TOTAL |

AFFIRMATION, Under penalty of perjury, I swear I am an officer or authorized representative of the above Licensee, and I have examined this report, and confirm it is true,

| Signature E-Mail Address | Title | Date |
|--------------------------|-------|------|
|--------------------------|-------|------|

INSTRUCTIONS: Prepare the report in duplicate, mail the original to the T.A.B.C., PO Box 13127, Austin, TX 78711-3127. Report must be filed on or before the 15th day of the month following each reporting period. Retain one copy for your files for a period of four years. As long as your license remains active, you must file a report even if no business was conducted. A legible copy of each invoice must be submitted to support each entry. Total gallons shipped must be included on each invoice. For assistance, please contact the Compliance Department at (512) 206-3342 or excise.tax@tabc.state.tx.us.

| IN | VOICE | | | | BARI | RELS | | | CASES: | (B)=Bottles | (C)=Cans | | |
|------|--------|-------------|------|-------|----------|----------|-----------|-----------|-----------|-------------|----------|----------|--|
| DATE | NUMBER | DISTRIBUTOR | CITY | BRAND | 1/2 BBL. | 1/4 BBL. | 12/32 (B) | 24/12 (B) | 24/16 (C) | 24/12 (C) | , , | | |
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