FORM C-231 (06/12)

ENTRY

CHECKED

TABC USE ONLY



NONRESIDENT MALT BEVERAGE REPORT

Monthly Report for Beer and Ale/Malt Liquor Shipped into the State of Texas \*\*REPORT IS DUE ON THE 15TH DAY OF THE MONTH FOLLOWING EACH REPORTING PERIOD\*\*

REPORTING PERIOD:										
TRADE NAM	E:			BE	ER LICENSE No. E	SS				
ADDRESS:				ALE/MALT LIQUOR PERMIT No. S/U						
CITY:		STATE:								
	<u>Beer</u> = 4% a	Icohol by weight or less	Ale/Malt	Liquor = over 4	1% alcohol by v	veight				
INVOICE				OIT/	GALLONS					
DATE	NUMBER	TX DISTRIBUTOR / WHOLESALER	LER CITY		BEER	ALE/MALT LIQUOR				
				TOTAL						
AFFIRMATION		Y REPORT MUST BE INCLUDED rjury, I swear I am an officer or authorized re omplete.								
S	Signature	Title		E-N	lail	Date				

INSTRUCTIONS: This form and any attachments must be filed on or before the 15th day of the month following each reporting period. Mail to TABC, PO BOX 13127, AUSTIN, TX 78711-3127 or submit electronically to the e-mail address below. Retain one copy for your files for a period of four years. As long as your license/permit 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 of beer and ale/malt liquor must be included on each invoice. For assistance, please contact the Tax Division at (512) 206-3342 or excise.tax@tabc.state.tx.us.

# <u>Beer</u> = 4% alcohol by weight or less

# <u>Ale/Malt Liquor</u> = over 4% alcohol by weight

INVOICE		TX DISTRIBUTOR / WHOLESALER	CITY	GALLONS			
DATE	NUMBER	TA DISTRIBUTOR / WHOLESALER	GIT	BEER			

### **TEXAS ALCOHOLIC BEVERAGE COMMISSION**

#### SUMMARY OF MALT BEVERAGE BRANDS AND PACKAGE SIZES SHIPPED INTO THE STATE OF TEXAS

TRADE NAME:					MONTH/YEAR:						
BRAND NAME BEER OR ALE/MALT		NUMBER OF CASES / KEGS									
(alphabetically)	LIQUOR	1/2 bbl	1/4 bbl	1/6 bbl	24/12	24/16					
							1				
	TOTAL										