PART 1

COMMONWEALTH OF VIRGINIA
ALCOHOLIC BEVERAGE CONTROL AUTHORITY
INTERNET WINE RETAILER REPORT

File this report with Virginia Alcoholic Beverage Control Authority, P O Box 27491, Richmond, Virginia 23261-7491, accompanied by remittance and the total of such taxes, and markup collected during the preceding month. A report is required to be filed even if you had no sales for the month. This report shall be postmarked no later than the fifteenth of the month or, if the fifteenth is not a business day, the next business day thereafter.	Name Trading as _____ Address _____ City, State, Zip	A.B.C. Internet Wine Retailer License No. _____ Report for the month of_____ Year _____

Total Quantity Shipped During the Month **WINE** **CIDER**

Totals Carried Forward from Schedule A _____ _____

FOR CALCULATION OF WINE

PRODUCT TYPE **RATE** **AMOUNT DUE**

WINE (TOTAL Liters)_____ 0.40 $_____

CIDER (TOTAL LITERS)_____ 0.08 $_____

TOTAL SUBMITTED WITH REPORT $_____ RECEIPT NO. _____

I swear (or affirm) that this report has been examined by me, and, to the best of my knowledge and belief, is a true and complete report made in good faith for the period as stated, pursuant to the ALCOHOLIC BEVERAGE CONTROL ACT and regulations of the Virginia A.B.C. Board.

PMD_____

STATUS_____

Signed _____

Title _____

Date _____

Part 2 (Schedule A) Wine　　　　　　**INTERNET WINE RETAILER REPORT**　　　　

| Invoice | | Virginia Resident Shipped To | | Product | Wine or Cider | | | Brand Name | | Total | Common |
Date Shipped	No.	Name	Street and No. City, State & Zip Code	Type W / C	No. of Bottles	Size In Liters	Total Liters			Price	Carrier Number
			Total Number of Wine Liters							
			Total Number of Cider Liters							