

DEPARTMENT OF LIQUOR CONTROL
4444 RICE STREET, SUITE 120
LIHUE, KAUAI, HAWAII 96766

TEL: (808) 241-4966 • FAX: (808) 241-6585

FISCAL YEAR: July 1, _____ - June 30, _____

WHOLESALE DEALER

- General
- Beer & Wine

MANUFACTURER

- Beer
- Wine

Licensee: _____

Trade Name: _____

Premises Address: _____

License No.: _____

GROSS SALES FROM _____ to _____
(date) (date)

Total gross liquor sales to persons for private use and consumption\$ _____

Name/Title of Person preparing report _____ Phone # _____

I declare, under the penalties set forth in Chapter 281, Hawaii Revised Statutes, that this report has been examined by me and is a true, correct, and complete report, pursuant to Chapter 281 and the Rules & Regulations of the Liquor Control Commission of the County of Kauai.

Date _____

Signature of Licensee or Authorized Agent

Print Name/Title

THIS FINAL GROSS SALES REPORT IS DUE ON OR BEFORE JULY 31 FOR THAT LICENSE YEAR OR WITHIN 30 DAYS OF THE CLOSING OF BUSINESS OR CANCELLATION OR REVOCATION OF THE LICENSE. REPORTS POSTMARKED ON THE DUE DATE SHALL BE ACCEPTABLE.