

**COMMONWEALTH OF VIRGINIA
DEPARTMENT OF ALCOHOLIC BEVERAGE CONTROL
RICHMOND
VIRGINIA FARM WINERY MONTHLY REPORT**

<p>File this report with the Virginia Department of Alcoholic Beverage Control, 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.</p>	<p align="center">A.B.C. LICENSE NO. _____ REPORT FOR THE MONTH OF _____</p> <p>Month _____ 20__</p>
<p>Name Trading as _____</p> <p>Address _____</p> <p>City, State, Zip _____</p>	

Item	Wine	Cider
1. Liters of Virginia Farm Wine and Cider Transferred to Retail Outlets During the Month		
2. Liters of Commercial Wine and Cider Transferred to Retail Outlets During the Month		
3. TOTAL (Item 1 plus Item 2) (Net Taxable Liters)		
<p>LIST PURCHASE ORDER NUMBERS FOR THE MONTH If you chose to mail your purchase orders with your tax report, then the report and purchase orders must be postmarked by the fifth (5th) of the month and if the fifth is not a business day, the next business day thereafter.</p>		

	NET LITERS	RATE	AMOUNT DUE
WINE		0.40	
CIDER		0.08	
TOTAL SUBMITTED WITH REPORT			

FOR ABC DEPT. USE ONLY

WINE: 12% \$ _____ \$ _____ +Cider Markup \$ _____ Code 030169

WINE: 44% \$ _____ Code 01054

WINE: 44% \$ _____ Code 01057

REC. NO. _____ PMD _____ STATUS _____

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.

Signed _____

Title _____

Date _____

THIS COPY TO BE RETURNED TO VA. A.B.C. BOARD