



1328204012



GEORGIA DEPARTMENT OF REVENUE
ALCOHOL & TOBACCO DIVISION
TELEPHONE: (404) 417-4900
E-MAIL: ATDIV@DOR.GA.GOV

DUE TO BE FILED BY 10
DAYS AFTER DUE DATE

WHOLESALE WINE REPORT OF INVENTORY

Submit online at <https://gtc.dor.ga.gov>

NAME OF WHOLESALER			
STREET	CITY	STATE	ZIP CODE

INVENTORY OF WINE
IN THE POSSESSION OF THE ABOVE NAMED
WHOLESALER AS OF THE CLOSE OF OPERATION ON JANUARY 31 AND JULY 31 EACH YEAR

TAX CATEGORY	REPORT IN LITERS
FOREIGN WINE 14% OR LESS	
FOREIGN WINE OVER 14%	
DOMESTIC WINE 14% OR LESS	
DOMESTIC WINE OVER 14%	

IMPORTANT

The inventory as reflected and recorded on this document will be used for the purposes of determining tax liability. Upon the signing of this document by the wholesaler or its authorized agent, the wholesaler agrees and acknowledges that the inventory figures reflected above shall be binding on the wholesaler for purposes of calculating the wholesaler's tax liability pursuant to O.C.G.A. § 3-6-50. It is therefore imperative that you are in accord and agreement as to the accuracy of the inventory before affixing your signature to same.

The undersigned does hereby swear, subject to criminal penalties for false swearing, that a complete inventory has been conducted of all wine on hand on date above given, and further swears that the inventory figures recorded above accurately reflect the inventory of wine on hand on the date indicated above; and the undersigned hereby attests and affirms this report to be correct and accurate.

Sworn to and subscribed before me
this ____ day of _____
20____.

SIGNED _____
(Signature of Officer, Partner, or
Owner of above named Company)

Notary Public

(Title)

My commission expires:

Signature: This report must be signed by the owner if a natural person, and in cases where the owner is a partnership by a partner thereof, and if a corporation, by an officer thereof.