

Schedule A (Rev. 1/13)
 Georgia Department of Revenue
 Alcohol and Tobacco Division
 Telephone: (404) 417-4900
 E-mail: ATDIV@dor.ga.gov



1329004012

**STATE TAX APPLICATION
 SCHEDULE A – LIST OF LABEL RENEWAL
 FOR DISTILLED SPIRITS**

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

STATE TAXPAYER IDENTIFIER	ALCOHOL LICENSE NUMBER
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LEGAL BUSINESS NAME

List name and required information for each brand of liquor you are renewing and plan to continue to sell in the State of Georgia. List the label names in alphabetical order.

1	LABEL NAME	LABEL TYPE NAME	TYPE	% OF ALCOHOL CONTENT BY VOLUME	AGE (YRS)
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

I DECLARE UNDER PENALTY OF PERJURY THAT THIS STATEMENT HAS BEEN EXAMINED BY ME, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE.

 Signature Title Date

(Must be signed by licensee. Licensee must also be the owner, partner, or an authorized officer of the corporation.)