City of Princeton

Monthly Sales of Alcoholic Beverages Report

Name of Licensee: _____

Address: _____

Person filing report: _____ .

Report for period ending: _____ Date Filed: _____

Restaurants only

A. Food Sales for period (in dollars).....$_____

B. Alcoholic Beverage Sales for period (in dollars).....$_____

C. Total Food and Alcoholic Beverage Sales for period.....$_____

D. Line A divided by line C ..... _____%
(Determines percentage of food sales)

E. Line B divided by line C ..... _____%
(Determines percentage of Alcoholic Beverage Sales)

Retail and Package Stores only

A. Non Alcoholic Beverage Sales for period.....$_____
(Package stores only – N/A others)

B. Alcoholic Beverage Sales for period (in dollars).....$_____
(All retail outlets)

C Total of A+B .....$_____

D. Line B divided by line C (package stores only).....$_____
(Determines percentage of Alcoholic Beverage Sales)

All outlets, Package, Retail, Special license and Restaurant.

1.Line B x 6% = Gross amount of Regulatory Fee Due.....$_____

2. Divide annual license fees by 12 months = Monthly license Credit.....$_____

3. Interest owed, if applicable (12% per annum).....$_____

4. Penalty Owed, if applicable
(1^{st} Offense - $50.00, 2^{nd} Offense - $100.00. 3^{rd} Offense - $200.00).....$_____

5. Net Regulatory Fee Due.....$_____

I hereby swear that the statement made herein and in any supporting schedules are true, correct and complete to the best of my knowledge.

_____
Signature of individual preparing return Date

This return must be filed and paid in full by the 20^{th} day of each month, for the preceding month. Please make check payable to City of Princeton, 206 E. Market St. Princeton, Ky 42445 Attn: PABCA