



## Liquor Tax Return

Account# \_\_\_\_\_

\_\_\_\_\_  
(Business Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip)

\_\_\_\_\_  
(Phone Number)

DATE: \_\_\_\_\_

Liquor purchases for the month of \_\_\_\_\_, 20\_\_\_\_.

Purchases (Attach Receipts)----- \_\_\_\_\_

Tax (10% of purchases)----- \_\_\_\_\_

Penalty (15% of tax after 15<sup>th</sup> of month)----- \_\_\_\_\_

Total Due----- \_\_\_\_\_

By: \_\_\_\_\_

Title: \_\_\_\_\_

This report is due on the 10<sup>th</sup> of each month and if not paid by the 15<sup>th</sup>, a penalty of 15% of the above tax shall be added.

City of Fairhope  
Revenue Department  
PO Drawer 429  
Fairhope AL 36532