



Malt Beverage License
135 W. Cherokee Ave. Suite 124
Cartersville, Georgia 30120
Office-770-387-5005. Fax 770-387-5644

AFFIDAVIT OF SALES OF BEER AND WINE

Business Name

BW #

Location Address

I, the undersigned, do certify that the following is a true and correct accounting of sales reported on the attached Georgia State Sales Tax Report form for the month of _____, 20____.

A copy of the monthly Georgia Sales Tax Report is required to be attached.

	<u>SALES</u>
Beer and/or Wine....	\$ _____
Sales of Groceries and Food Products...	\$ _____
Other Sales.....	\$ _____
Total Sales.....	\$ _____

ATTACH A COPY OF GEORGIA SALES & USE TAX REPORT FOR THE PERIOD REPORTED (ST-3)

This affidavit and sales tax report is required to be filed with this office no later than the 20th day of the month following the month for which the report is made.

Mail to: Bartow County Community Development
135 West Cherokee Avenue, Suite 124
Cartersville, GA 30120

I swear or affirm that the information provided in this affidavit is true and correct.

Authorized Signature

Date

Sworn to and subscribed before me

This _____ day of _____, 20____

Notary Public, State of Georgia

My commission expires: _____

Re