FORM C-220 (10/16)

CARRIER'S REPORT

TABC USE ONLY

ENTRY

CHECKED

TEXAS ALCOHOLIC BEVERAGE COMMISSION
service ★ courtesy ★ integrity ★ accountability

Monthly Report of Interstate Shipments of Alcoholic Beverages

During the Month/Year of: _____

REPORT IS DUE ON THE 15TH DAY OF THE MONTH FOLLOWING EACH REPORTING PERIOD*

TRADE NAME: **PERMIT NUMBER:**

ADDRESS:

CITY: **STATE:** **ZIP CODE:** **PHONE NUMBER:**

DATE SHIPPED	CONSIGNOR (Shipped From)	CITY / STATE	CONSIGNEE (Shipped To)	CITY / STATE	FREIGHT BILL #	NUMBER OF PKGS.	COMMODITY Liquor, Wine, Ale, Beer	DATE DELIVERED

AFFIRMATION, Under penalty of perjury, I swear I am an officer or authorized representative of the above Permittee, and I have examined this report, and confirm it is true, correct, and complete.

Signature **E-Mail Address** **Title** **Date**

INSTRUCTIONS: This form and any attachments must be filed on or before the 15th day of each month, following each reporting period. Mail to TABC, PO BOX 13127, AUSTIN, TX 78711-3127 or submit electronically to the e-mail address below. Retain one copy for your files for a period of four years. As long as your permit remains active, you must file a report even if no business was conducted. For assistance, please contact the Tax Division at (512) 206-3342 or excise.tax@tabc.texas.gov.

DATE SHIPPED	CONSIGNOR (Shipped From)	CITY / STATE	CONSIGNEE (Shipped To)	CITY / STATE	FREIGHT BILL #	NUMBER OF PKGS.	COMMODITY Liquor, Wine Ale, Beer	DATE DELIVERED