

B-C-788

Nonresident Wine Vendor Monthly Report

For Transactions to N.C. Wine Wholesalers, Importers, or Bottlers

Required Report for Month Ended (MM-DD-YY)	DOR Use Only	FEIN or SSN	
Legal Name (First 35 Characters) (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS)		NCDOR ID/Account Number	
Trade Name		ABC Permit Number	
Mailing Address		Fill in circle if applicable: <input type="radio"/> Amended Report <input type="radio"/> No Transactions	
City	State		Zip Code
Name of Contact Person	State of Domicile		
Phone Number	Fax Number		

Liters Sold, Delivered, or Shipped to N.C. Wine Wholesalers, Importers, or Bottlers Non-Tax-Paid (Attach Page 2 if necessary)				
Invoice Date	Invoice Number	Names and Addresses of NC Wholesalers, Importers, or Bottlers	Unfortified Wine (In Liters)	Fortified Wine (In Liters)
<div style="border: 1px solid black; min-height: 250px;"></div>				
1. Late Filing Penalty (Enter \$50.00 per day if late filed, maximum of \$1,000)			1. \$	

Signature: _____ Title: _____ Date: _____
I certify that, to the best of my knowledge, this report is accurate and complete.

Visit our website at www.ncdor.gov

Mail to: North Carolina Department of Revenue, Excise Tax Division, 1429 Rock Quarry Road, Suite 105, Raleigh, NC 27610
 Questions: Contact Excise Tax Division at: Telephone Number: (919) 733-3641; Fax Number: (919) 733-8654

Legal Name _____ NCDOR ID/Account Number _____

Liters Sold, Delivered, or Shipped to N.C. Wine Wholesalers, Importers, or Bottlers Non-Tax-Paid *(Attach separate sheet if necessary)*

Invoice Date	Invoice Number	Names and Addresses of NC Wholesalers, Importers, or Bottlers	Unfortified Wine <i>(In Liters)</i>	Fortified Wine <i>(In Liters)</i>