

Liquor Wholesaler's Report Amended Report

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Licensee Name Mailing Address Physical Address						Reporting Period (Quarter/Year) Telephone Number License Number and License Type								
								1) I	Date	2)	Retailer/ Delivery Point	3)	Type of Liquor	4) Quantity Sold
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License	ee or Duly	Authorize	d Agent Signature Print	or Type Name	Telephone Numbe	er Date								