

**INSTRUCTIONS FOR
IN STATE IMPORTERS REPORT OF RECEIPTS OF TABLE WINE
CONTAINING GREATER THAN 16.5% ALCOHOL BY VOLUME (ABV)
FORM IW_1_CLASS II TABLE WINE_GREATER THAN 16.5% ALCOHOL ABV**

In State Importers Report of Receipts of Table Wine Containing Greater Than 16.5% ABV is due prior to the 20th of each month for all products received during the preceding month.

License Number: Your complete license number assigned by the ABC Board. (Example: 210-000123456. The complete license number is the type ("210") and the 9 digits shown as the license number.)

Manufacturer/Importer Name: Trade name as listed on your license issued by the ABC Board.

Contact Person: Name of contact person if we have any questions about this report. If that person has changed since your last report, please check the box for new contact.

E-Mail Address: E-Mail address of the contact person listed.

Phone Number: Phone number of the contact person listed.

Reporting Period: Month and year of period reported.

Sizes: State each container size of table wine containing greater than 16.5% ABV received separately. The preferred method is to state "containers per case/size in liters." Please refer to our list of standard table wine sizes for guidance. You may add columns as needed. Please make sure that any columns you add do give a total on the last row of the report.

BODY OF REPORT

These rows are used to report, **by supplier and invoice number**, each receipt of table wine containing greater than 16.5% ABV from nonlicensed suppliers during the month. You may add rows as needed. Please make sure that totals at the end of the report include all rows you may have added.

- **Supplier** – The trade name of the supplier that table wine containing greater than 16.5% ABV was received from during the month.
- **Invoice Number** – The invoice number of document listing products by case/size which were received during the month. This number should be the **exact number**, including alphanumeric characters, as shown on the invoice. Each invoice **must be** stated separately. Order numbers **are not** acceptable.
- **Copies of all invoices for products received from nonlicensed suppliers must be sent to the Tax & Trade Practices Division on or before your report due date.**
- **Date Shipped** – The date on the invoice from the nonlicensed supplier.
- **Cases Shipped** – The number of cases for each product size shown on each invoice received during the month.
- **Last Row** – The total cases of each size shipped during the month.

Please refer to the SAMPLE attached for guidance in completing this form.

If you have questions, you may contact the Tax & Trade Practices Division at (334) 260-5408 or audit@abc.alabama.gov.

**INSTRUCTIONS FOR IN STATE IMPORTERS REPORT
OF TABLE WINE SALES TO LICENSED WHOLESALERS
CONTAINING GREATER THAN 16.5% ALCOHOL BY VOLUME (ABV)
FORM IW_2_CLASS II TABLE WINE_GREATER THAN 16.5% ABV**

In State Importer Report of Table Wine Sales to Licensed Wholesalers Containing Greater than 16.5% ABV is due prior to the 20th of each month for all sales made to each wholesaler during the preceding month.

License Number: Your complete license number assigned by the ABC Board. (Example: 210-000123456. The complete license number is the type ("210") and the 9 digits shown as the license number.)

Manufacturer/Importer Name: Trade name as listed on your license issued by the ABC Board.

Contact Person: Name of contact person if we have any questions about this report. If that person has changed since your last report, please check the box for new contact.

E- Mail Address: E-Mail address of the contact person listed.

Phone Number: Phone number of the contact person listed.

Reporting Period: Month and year of period reported.

Sizes: State each container size of table wine containing greater than 16.5% ABV sold separately. The preferred method is to state "containers per case/size in liters." Please refer to our list of standard table wine sizes for guidance. You may add columns as needed. Please make sure that any columns you add do give a total on the last row of the report.

BODY OF REPORT

These rows are used to report **by wholesaler and invoice number**, each sale of table wine containing greater than 16.5% ABV to wholesalers during the month. You may add rows as needed. Please make sure that totals at the end of the report include all rows you may have added.

- **Wholesaler Sold To** – The trade name of the wholesaler that table wine containing greater than 16.5% ABV was sold to during the month as it appears on the license issued by the ABC Board.
- **City Location of Wholesaler** – The city where the wholesaler is located.
- **License Number** – The complete license number of the wholesaler issued by the ABC Board. (Example: 100-000123456. The complete license number is the type ("100") and the 9 digits shown as the license number.)
- **Invoice Number** – The invoice number of document listing products by case/size which were sold to wholesaler. This number should be the **exact number**, including alphanumeric characters, as shown on the invoice. Each invoice **must be** stated separately. Order numbers **are not** acceptable.
- **Copies of all invoices for products sold to licensed wholesalers during the month must be sent to the Tax & Trade Practices Division on or before your report due date.**
- **Date Sold** – The date from the invoice that the product was sold to the wholesaler.
- **Cases Shipped** – The number of cases for each product size shown on each invoice shipped during the month.
- **Last Row** – The total cases of each size shipped during the month.

Please refer to the SAMPLE attached for guidance in completing this form.

If you have questions, you may contact the Tax & Trade Practices Division at (334) 260-5408 or audit@abc.alabama.gov.