



133740049

NON-RESIDENT BREWERY: _____

PERMIT NUMBER: _____

FOR THE MONTH OF _____ 20____

CONSIGNEE: (One Consignee Per Page) _____

Page _____ of _____

1	2	CASES OR KEGS													16	
		3	4	5	6	7	8	9	10	11	12	13	14	15		
DATE	Invoice Number	24/7	24/10	24/11.2	24/12	24/16	24/22	12/32	1/4 Keg	1/2 Keg	50 L Keg	1/6 Keg	12/25.4			
1																
2																
3																
4																
5																
6																
7																
8																
9																
10																
11																
12																
13																
14																
15																
16																
17																
18																
19																
20																
21																
22																
23																
24	Total Cases/Kegs Shipped															Total Gallons for this Consignee:
25	Multiply by Conversion Factor	1.313	1.875	2.100	2.250	3.000	2.063	3.000	7.750	15.500	13.210	5.167	2.381			
26	Total Gallons by Container															

**NON-RESIDENT BREWERY MONTHLY REPORT
OF BEER DELIVERIES INTO MARYLAND
INSTRUCTIONS**

This report, together with Form COM/RAD 375, shall be filed and physically received by the Revenue Administration Division no later than the 10th day of the month, following the month which it covers.

Insert in the spaces provided, the Non-Resident Brewery name and Non-Resident Brewery permit number.

In the space provided, indicate the report month and year.

Column	Line	Allotting one COM/RAD 374 for each consignee , insert the name of the receiving retailer within the State of Maryland.
1	1-23	Insert the date the shipment was made.
2	1-23	Insert the invoice number for each shipment.
3-15	1-23	Insert the number of cases or kegs of each size shipped. Use additional sheets if necessary. List returns in the same manner as deliveries, but as deductions minus quantities).
3-15	24	Insert the total number of cases or kegs shipped to this consignee total lines 1-23.
3-15	25	This line is to be used for the appropriate container-to-gallons conversion factor for each container size.
3-15	26	Insert the total number of gallons for each container size.
16	26	Insert the grand total in gallons of beer shipped to this consignee. Complete only one line 26 for each consignee even if multiple sheets are used.

Note: Beer may not be sold for consumption within this state or sold or delivered to the holder of a wholesale or retail license in container sizes of less than 6.33 ounces.

Contact information:

COMPTROLLER OF MARYLAND
REVENUE ADMINISTRATION DIVISION
ALCOHOL TAX
PO BOX 2999
ANNAPOLIS MD 21404-2999
410-260-7127
FAX: 410-260-7924
http://taxes.marylandtaxes.com/Business_Taxes/Business_Tax_Types/Alcohol_Tax/Filing_Information/