

MARYLAND FORM 037 WHOLESALER'S MONTHLY BEER REPORT

Prepare this return in duplicate. Retain duplicate.
To be filed by all wholesalers who are authorized to sell beer to retail dealers.

Wholesaler Name		License/Permit #
Street Address		For Calendar Month
City	State	Zip Code

This report, setting forth acquisitions of all kegs, cans or other containers of beer, must be filed with the Comptroller of Maryland, Alcohol and Tobacco Tax office, and must be received not later than the 10th day of the month following the month which this report covers.

Summary of Beer Deliveries Received

	A Supplier Name	B Total Gallons By Supplier
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

	C Supplier Name	D Total Gallons By Supplier
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		

Statement: I certify that this report, including schedules, has been examined by me and is to the best of my knowledge and belief a true and complete report for the month stated in accordance with the provisions of the Tax-General Article and Article 2B of the Annotated Code of Maryland, as amended, title "Alcoholic Beverages", and regulations issued under authority thereof. I further certify that I/we will maintain all records including acquisitions and dispositions of alcoholic beverages in accordance with Article 2B.

Signature

Title: Owner, Partner or Officer

Date

**MARYLAND
FORM
037** **WHOLESALE'S MONTHLY BEER
REPORT INSTRUCTIONS**

This report shall be properly filed and physically received by the Alcohol and Tobacco Tax office no later than the 10th day of the month following the month which the report covers. The report shall be submitted with Form COM/RAD-037-5 to support all entries.

Column Line

- A & C 1-24 From individual forms COM/RAD-037-5, insert the name of each supplier shipping beer into the State of Maryland.
- B & D 1-24 Insert the number of gallons received from each supplier, as indicated on line 30 column 16, Form COM/RAD-037-5.

The completed Form COM/RAD-037 **must** be signed by the owner, partner or officer of the corporation. If this is a corporation, an officer (President, Vice-President, Secretary or Treasurer) must sign.

Send remittance to: Comptroller of Maryland
Revenue Administration Division
Alcohol Tax
PO BOX 2999
Annapolis, MD 21404-2999

Telephone: 410-260-7127 or 800-638-2937
Fax: 410-260-7924