

Comptroller of Maryland
MATT Regulatory Division
Alcohol and Tobacco Tax
P. O. Box 2999
Annapolis, Maryland 21404-2999
Phone: 410-260-7314 Fax: 410-974-3201

Monthly Report of Retail License Activity

City or County: _____

Date: _____

This monthly report of license issuing authorities covering alcoholic beverage licenses is to be filed by the 15th of the month preceding the month covered in the report. Mail the original and retain a copy for your files.

In accordance with the provisions of Article 2B of the Annotated Code of Maryland (we) (I) herewith submit a true and complete report of all alcoholic beverage license transactions authorized by this office for the month ending _____ 20_____. This report has been examined by me and I acknowledge same to cover all new licenses issued, all changes and all deletes (affecting licenses previously issued) for the month stated.

Signature of Issuing Authority

Title of Issuing Authority

Instructions

- A. Type or Print
- B. List add, change and delete transactions on the reverse side.
- C. Precede the Central Registration Number with a two digit county code (i.e. Allegany County, use **01**-12345678). The county codes appear on the reverse side of this form.
- D. It may be necessary to complete more than one type of transaction. A transfer of a license would be considered a DELETE and an ADD. Delete the outgoing license and add the incoming license.
- E. If any of the following occur, use ADD:
 - 1) New License issued; or
 - 2) New license issued due to license transfer (DELETE the previous license)
- F. If any of the following occur, use DELETE:
 - 1) Canceled or revoked license;
 - 2) License not renewed; or
 - 3) License canceled due to transfer to new license (ADD the new license)
- G. If any of the following occur, use CHANGE:
 - 1) Change of one or more officers of the corporation;
 - 2) Name change;
 - 3) Change in location; or
 - 4) Other information that has changed (e.g. phone number)

CODE PREFIX	CITY/COUNTY	CODE PREFIX	CITY/COUNTY
01	Allegany County	14	Howard County
02	Anne Arundel County	15	Kent County
03	Baltimore County	16	Montgomery County
04	Baltimore City	17	Prince George's County
05	Calvert County	18	Queen Anne's County
06	Caroline County	19	St. Mary's County
07	Carroll County	20	Somerset County
08	Cecil County	21	Talbot County
09	Charles County	22	Washington County
10	Dorchester County	23	Wicomico County
11	Frederick County	24	Worcester County
12	Garrett County	25	City of Annapolis
13	Harford County		

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1. City or County _____ Page _____ of _____

2. Type of Transaction(s): <input type="checkbox"/> Add <input type="checkbox"/> Delete <input type="checkbox"/> Change	
3. Central Registration Number:	11. City or County License Number:
4. Class and Type of License:	On <input type="checkbox"/> Off <input type="checkbox"/> 12. Transaction Date:
5. Entity or Corporate Name	
6. Trade Name	
7. Retailer's Address:	
8. Retailer's Telephone Number:	
9. Licensee 1:	
Licensee 2:	
Licensee 3:	
10. Remarks:	

2. Type of Transaction(s): <input type="checkbox"/> Add <input type="checkbox"/> Delete <input type="checkbox"/> Change	
3. Central Registration Number:	11. City or County License Number:
4. Class and Type of License:	On <input type="checkbox"/> Off <input type="checkbox"/> 12. Transaction Date:
5. Entity or Corporate Name:	
6. Trade Name:	
7. Retailer's Address:	
8. Retailer's Telephone Number:	
9. Licensee 1:	
Licensee 2:	
Licensee 3:	
10. Remarks:	