



# OUT-OF-STATE WINE SHIPPER MONTHLY TAX REPORT

6601 Campstool Rd., Cheyenne, Wyoming 82002-0110

\_\_\_\_\_  
Name of Direct Shipper

\_\_\_\_\_  
Address

\_\_\_\_\_  
License #

For the Month of \_\_\_\_\_

Date Submitted

\_\_\_\_\_, 201\_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**This report along with copies of all invoices shipped into Wyoming must be filed monthly so as to arrive at the Department of Revenue Liquor Division on or before the 10<sup>th</sup> of the following month.**

*Invoices Shall Be Submitted With Report*

Invoice #	Address Shipped To	# of Bottles	Volume In Liters	Price of Wine Per Invoice
<b>Total Price of WINE Shipped into Wyoming (enter as "Total Report Price" below)</b>				
<i>Attach additional sheets, if necessary.</i>				

**Report the price of WINE invoiced only. DO NOT report shipping, packaging, taxes or any other costs.**

**Total Report Price**

\$ \_\_\_\_\_

**Times (X) .12**

For Official Use Only	
212040	
212121	
710500	

**Total Tax Due at 12%**

\$ \_\_\_\_\_

Affidavit of Authenticity: I understand that by signing this return I affirm all information shown is true and correct to the best of my knowledge. I understand that this statement is made subject to the penalties described in W.S. 12-2-204. I understand I am to retain all ordinary business records pertaining to this return for at least 3 years and allow the Department of Revenue Liquor Division to audit such records upon reasonable request.

\_\_\_\_\_  
**Owner or Officer**

Mail completed report and any payments to:

Wyoming Liquor Division  
Attn: Wine Direct Ship Coordinator  
6601 Campstool Road  
Cheyenne, WY 82002-0110