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Reserve for Liquor Commission Time Stamp

LIQUOR COMMISSION
CITY AND COUNTY OF HONOLULU
711 KAPIOLANI BOULEVARD, SUITE 600, HONOLULU, HAWAII 96813-5249
PHONE (808) 768-7300 • FAX (808) 768-7311
INTERNET ADDRESS: www.honolulu.gov/liq

T-R

DECLARATION OF GROSS LIQUOR SALES

[TEMPORARY PERIOD REPORTING]

(Pursuant to Rule 3-81-17.54(c))

RESTAURANT

FOR LATE FILING ONLY
☐ OTC BY _____
☐ PM DATE _____

☐ **AMENDED REPORT**
Attach supporting documents

Report due 31 days after cancellation or expiration of Temporary License

LICENSEE | LICENSE NO.
TRADE NAME | BUS PHONE NO.
NAME/TITLE OF PERSON PREPARING REPORT | PREPARER'S NO.
EMAIL ADDRESS (Required)

COMPUTATION OF ADDITIONAL LICENSE FEE

PART A: ON-PREMISES SALES

1.	Total Food Sales from _____ to _____ (Temporary License Period)	1.
2.	Total Non-Alcoholic Beverage Sales	2.
3.	Total Liquor Sales	3.
4.	General Excise Tax (Liquor sales portion only if assessed to customers)	4.
5.	Complimentary Drinks and/or Samples (Report at the full value)	5.
6.	**GROSS LIQUOR SALES (GLS On-Premises) (Add Lines 3 through 5)**	6. **0.00**

PART B: OFF-PREMISES CATERING SALES

7.	Total Food Sales from All Off-Premises Catering Sales	7.
8.	Total Non-Alcoholic Beverage Sales from all Off-Premises Catering Sales	8.
9.	Total Liquor Sales from All Off-Premises Catering Sales	9.
10.	General Excise Tax (Liquor sales portion only if assessed to customers)	10.
11.	Complimentary Drinks and/or Samples (Report at the full value)	11.
12.	**GROSS LIQUOR SALES (GLS Off-Premises) (Add Lines 9 through 11)**	12. **0.00**

13	**COMBINED GLS (Add Lines 6 and 12)**	13. **0.00**
14.	Assessment Rate of the class of the respective license	14. 0.005
15.	**ADDITIONAL LICENSE FEE DUE AND PAYABLE** (Multiply Lines 13 and 14)	15. **0.00**

Please make checks payable to "City & County of Honolulu"

PAYMENT ENCLOSED ☐

OFFICE USE ONLY
☐ Page 2 of 2
Paid: _____
CK#: _____
Initial: _____
Date: _____ ( )

*** * * CONTINUE TO PAGE 2 OF 2 * * ***

For assistance, please contact HLC Auditing Team:
(808) 768-7343; Liq-Auditing@honolulu.gov

LICENSEE

LICENSE NO.

TRADE NAME

COST OF LIQUOR SOLD

A.	Beginning Liquor Inventory as of	A.
B.	Total Liquor Purchases for Temporary period reported above	B.
C.	Ending Liquor Inventory as of	C.
D.	**Cost of Liquor Sold for the period** (Lines A + B - C)	D. **0.00**

Pursuant to §3-81-17.5 et seq., the Rules of the Liquor Commission, and under the penalties set forth in §281, Hawaii Revised Statutes, I certify that this Gross Liquor Sales Report is true, accurate, and complete, and I am authorized to submit this report.

Date

Signature of Officer, Member, or Authorized Agent

Print Name/Title

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