



City of Ringgold

150 Tennessee Street
 Post Office Box 579
 Ringgold, Georgia 30736

Office 706-935-3061
 Fax 706-965-7446

PACKAGE STORE SALES EXCISE TAX REPORTING FORM

Due Date: 20th of each Month

Reporting Period: _____
 (Month, Year)

Business Name: _____

Address: _____

<u>Quantity of Containers Sold</u>	<u>Size of Container</u>	
_____	A. Beer and Malted Beverage (ounces)	\$ _____
_____	B. Beer ad Malted Beverage Barrel (gallons)	\$ _____
_____	C. Liters of Wine @ 22 cents per liter	\$ _____
_____	D. Liters of Liquor @ 22 cents per liter	\$ _____
	E. Package Sales Excise Tax (A + B + C)	\$ _____
	F. Less 3% of Line D for Collection Fee ⁽¹⁾	\$ _____
	G. Interest ⁽²⁾	\$ _____
	H. Penalty ⁽³⁾	\$ _____
	I. Total Remitted (D – E + F + G)	\$ _____

- (1) Licensees filing after the 20th shall not be entitled to the collection fee.
- (2) Interest rate is 10% per month or portion of month.
- (3) Penalties shall be applied at a rate of 15%.

Excise Tax on all beer and malt beverages sold by wholesalers to retailers in the city is \$0.05 per 12-ounce container and \$6.00 for each container of tap or draft beer or malt beverage of 15½ gallons and in similar proportion for bottles, cans and containers of various sizes as follows:

<u>Quantity of Containers Sold</u>	<u>Size of Container</u>	<u>Tax Per Container</u>
_____	7 ounces	\$0.0291
_____	8 ounces	\$0.0333
_____	12 ounces	\$0.0500
_____	14 ounces	\$0.0583
_____	16 ounces	\$0.0666
_____	32 ounces	\$0.1333
_____	½ barrel (15½ gallons)	\$6.00
_____	1 barrel (31 gallons)	\$12.00

- The city manager may examine the records and financial reports to verify the accuracy of any return.
- The business is required to retain copies of these records on site for three (3) years.
- Make checks payable to "City of Ringgold"
- Mail to: **City of Ringgold Alcohol Excise Tax - Package Sales**
PO Box 579
Ringgold, Georgia 30736

This report must be signed and paid no later than the 20th day of the month following the moth for which this report is made. I hereby certify that the statements made herein and in any supporting schedules are true, correct, and complete to the best of my knowledge.

Signature _____ Date _____

Print Name _____ Phone # _____

Email Address _____