CARRIER'S REPORT OF INTERSTATE SHIPMENTS OF ALCOHOLIC BEVERAGES DESTINED TO NEVADA POINTS
NEVADA REVISED STATUTE 369.450

Form LTD 5 (1/01)

NEVADA DEPARTMENT OF TAXATION
LIQUOR TAX DIVISION
1550 E. COLLEGE PARKWAY
CARSON CITY NV 89706

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Name of Carrier ..... Address ..... Reporting for month of ....., 20 .....

This report **must** be filed with the Nevada Department of Taxation, Carson City, Nevada on or before the 10th of each month following delivery in Nevada.

FREIGHT BILL		DELIVERED TO	NEVADA	SHIPPER	ORIGIN	DESCRIPTION OF ALCOHOLIC BEVERAGE		
Delivery Date	Number	CONSIGNEE	DESTINATION			No. Pkgs.	Type Pkg.	Kind

THE UNDERSIGNED HEREBY CERTIFIES THAT THE FOREGOING REPORT IS MADE PURSUANT TO CHAPTER 369 OF NRS, AS AMENDED, AND COVERS THE MONTH SHOWN ABOVE FOR THE COMMON OR CONTRACT CARRIER NAMED IN THIS REPORT AND IS CORRECT TO THE BEST OF THE KNOWLEDGE AND BELIEF OF THE UNDERSIGNED.

Dated....., 20....., at..... Signed ..... Telephone (.....).....