



ABC  
ADMINISTRATOR

# LA GRANGE POLICE DEPARTMENT

121 W Main Street  
La Grange, KY 40031



(502) 225-0444  
Fax (502) 225-9783  
[www.lagrangepoliceky.org](http://www.lagrangepoliceky.org)

YEAR:

## QUARTERLY CITY ABC STATEMENT

**BUSINESS NAME:**

**CURRENT LICENSES HELD:**

PAID ANNUAL FEE: \$

## STATEMENT OF ALCOHOL SALES

<u>QUARTER MONTH</u>	<u>ALCOHOL SALES</u>
<input type="text"/>	... \$ <input type="text"/>
<input type="text"/>	... \$ <input type="text"/>
<input type="text"/>	... \$ <input type="text"/>
<b>QUARTER TOTAL: \$ <input type="text"/></b>	

## FEE CALCULATION

REGULATORY FEE (5% OF TOTAL): \$

LESS ¼ LICENSE FEE CREDIT: <\$  >

**PAYMENT DUE: \$**

\*If License Fee credit is larger than the Regulatory Fee due,  
enter "0" as Payment Due.

- If payment is due, MAKE PAYABLE TO: City of LaGrange -

## QUARTERLY PERCENT OF SALES

				ALCOHOL SALES
\$ <input type="text"/>	+	\$ <input type="text"/>	=	\$ <input type="text"/>
FOOD SALES		ALCOHOL SALES		TOTAL SALES
				<input type="text"/> %
				% OF TOTAL SALES

**I HEREBY SWEAR AND AFFIRM THAT THE ABOVE STATEMENTS ARE THE TRUE GROSS RECEIPTS OF ALL ALCOHOL SALES AND THE PAYMENT DUE IS AN ACCURATE REGULATORY LICENSE FEE DUE TO THE CITY OF LA GRANGE.**

SIGNATURE:  DATE:

PRINTED NAME:  TITLE:

EMAIL ADDRESS: