Arizona Department of Liquor Licenses and Control
800 W Washington 5th Floor
Phoenix, AZ 85007-2934
www.azliquor.gov
(602) 542-5141

BUSINESS DATA REPORT

THIS FORM IS REQUIRED TO RENEW SERIES 11 AND 12 LICENSES WHICH HAVE BEEN IN OPERATION FOR A PERIOD OF TWELVE MONTHS OR LONGER.

Licensee's Name:_____

D.B.A.:_____

License #: _____

Time period included in this report: ____/____/_____ **through** ____/____/_____
Month Day Year Month Day Year

(Please report your sales for the reporting period that includes the 12 months preceding your license expiration date)

NET SALES INFORMATION			
MONTH/YEAR	**FOOD SALES**	**TOTAL LIQUOR SALES**	**TOTAL SALES**
			0
			0
			0
			0
			0
			0
			0
			0
			0
			0
			0
			0
TOTALS	0	0	0

INVENTORY VALUE (most recent)					
	FOOD (exclude non- food items)	**BEER**	**WINE**	**LIQUOR**	**TOTAL**
DOLLAR AMOUNT					0

I certify that all information presented on this report is true and accurate:

Signature: _____ Title: _____ Date: ____/____/_____

Individuals requiring ADA accommodations please call (602)542-9027