



**MONTHLY ABC REGULATORY REPORT  
NQ MALT BEVERAGE PACKAGE**

**Related to City of Williamsburg, Kentucky  
ALCOHOLIC BEVERAGE LICENSE**

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Monthly End Date: \_\_\_\_\_

Licensee Name: \_\_\_\_\_

Location Address: \_\_\_\_\_

Williamsburg ABC License No.: \_\_\_\_\_ Kentucky ABC License No.:(s): \_\_\_\_\_

1. Gross Receipts from Alcohol Sales: \$ \_\_\_\_\_

2. Regulatory Fee Due ---- 4% of Line 1 \$ \_\_\_\_\_

3. Penalty For Late Payment – 5% of Line 2 (If Any) \$ \_\_\_\_\_  
(\$10 minimum, 25% maximum of Line 2)

4. Interest For Late Payment – 8% \$ \_\_\_\_\_  
(8% of the Sum of Lines 2 + 3)

5. \*\*Less License Fee Credit (If Applicable) \$ \_\_\_\_\_  
(KRS 243.075 Sec. 1)

**6. Total Regulatory Fee Due: \$ \_\_\_\_\_**  
**(Lines 2 + 3 + 4)**

\*\*Reminder: You may apply for the credit in the amount of your license; see Williamsburg City Clerk.

***I HEREBY CERTIFY THAT THE STATEMENTS MADE HEREIN AND IN ANY SUPPORTING SCHEDULES ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE.***

All Regulatory Fees must be received by the Williamsburg City Clerk No Later than the 20<sup>th</sup> of each month.

Failure to pay such remittance within ten (10) days of the due date constitutes a violation and shall subject a licensee to suspension or revocation.

**Remit Check or Money Order Payable to:**  
**CITY OF WILLIAMSBURG**  
**WILLIAMSBURG ABC Administrator**  
**ATTN: CITY CLERK**  
**423 Main Street or P.O. Box 119**  
**Williamsburg, KY 40769**

