

*Town of Braselton
4982 Hwy 53
P.O. Box 306
Braselton, GA 30517
706-654-3915 Phone 706-654-3109 Fax*

PER DRINK EXCISE TAX FORM

Name of Establishment: _____

Reported Month: _____ Year: _____

Report Gross Sales in Even Dollars

Gross Sales of Distilled Spirits by the Drink \$ _____

Cash Sales \$ _____

Credit Card Sales \$ _____

Amount of 3% Tax \$ _____

Net Amount Due \$ _____

I hereby certify that this return has been examined by me and is to the best of my knowledge correct and complete.

Signature

Date

Printed Name and Title

Phone Number