### DECLARATION OF GROSS LIQUOR SALES

#### TEMPORARY PERIOD REPORTING

(Pursuant to Rule 3-81-17.54(c))

Report due 31 days after cancellation or expiration of Temporary License

<table>
<thead>
<tr>
<th>LICENSEE</th>
<th>LICENSE NO.</th>
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<tbody>
<tr>
<td>TRADE NAME</td>
<td>PHONE NO.</td>
</tr>
<tr>
<td>MAILING ADDRESS</td>
<td></td>
</tr>
<tr>
<td>NAME/TITLE OF PERSON PREPARING REPORT</td>
<td>PHONE NO.</td>
</tr>
<tr>
<td>EMAIL ADDRESS (Required)</td>
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#### COMPUTATION OF ADDITIONAL LICENSE FEE

1. **Total Liquor Sales** from ___________ to ___________ (All sales must include the State General Excise Tax and Liquor Bottle Fees assessed.)

2. Complimentary Drinks and/or Samples (Report at the full value)

3. **GROSS LIQUOR SALES (GLS)** (Add Lines 1 and 2)

4. Assessment Rate of the class of the respective license

5. **ADDITIONAL FEE DUE AND PAYABLE** (Multiply Lines 3 and 4)

6. Please Enter the Amount of Your Payment

   Please make checks payable to “City & County of Honolulu”

#### COST OF LIQUOR SOLD

A. Beginning Liquor Inventory as of ___________

B. Total Liquor Costs* for Temporary period reported above

C. Ending Liquor Inventory as of ___________

D. **Cost of Liquor Sold for the period** (Lines A + B - C)

   *“Liquor Costs” mean manufacturing costs of finished liquor items.

Pursuant to §3-81-17.5 et seq., the Rules of the Liquor Commission, and under the penalties set forth in §281, Hawaii Revised Statutes, I certify that this Gross Liquor Sales Report is true, accurate, and complete, and I am authorized to submit this report.

**Signature of Officer, Member, or Authorized Agent**

**Print Name/Title**

**OFFICE USE ONLY**

Initial: __________

Date: __________

For assistance, please contact HLC Auditing Team:

(808) 768-7343; Liq-Auditing@honolulu.gov