

Products Sold/Distributed To:

Business Name: Contact Name:

Type of Business: End User Distributor Business Phone:

Business Address:
Street City Province Postal Code

Exemption Reference Number: Size of Drums: Number of Drums:

Business Name: Contact Name:

Type of Business: End User Distributor Business Phone:

Business Address:
Street City Province Postal Code

Exemption Reference Number: Size of Drums: Number of Drums:

Business Name: Contact Name:

Type of Business: End User Distributor Business Phone:

Business Address:
Street City Province Postal Code

Exemption Reference Number: Size of Drums: Number of Drums:

Business Name: Contact Name:

Type of Business: End User Distributor Business Phone:

Business Address:
Street City Province Postal Code

Exemption Reference Number: Size of Drums: Number of Drums:

Total Number of Bottles and Drums:

Distributor's Declaration:

I hereby certify that the information reported here is true and correct to the best of my knowledge.

Date: Signature: _____

Position: Print Name: _____

The information requested on this form is collected by the Liquor and Cannabis Regulation Branch under Section 26 (a) and (c) of the *Freedom of Information and Protection of Privacy Act* and will be used for the purpose of liquor licensing and compliance and enforcement matters in accordance with the *Liquor Control and Licensing Act*. Should you have any questions about the collection, use, or disclosure of personal information, please contact the Freedom of Information Officer at PO Box 9292 STN PROV GVT, Victoria, BC, V8W 9J8 or by phone toll free at 1-866-209-2111.