

HON. ALBERT J. MATRICCIANI, JR. (RET.)
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ELIZABETH A. HAFEY, ESQ.
ALTERNATE COMMISSIONER
HARVEY E. JONES

STATE OF MARYLAND
BOARD OF LIQUOR LICENSE COMMISSIONERS

FOR BALTIMORE CITY
1 N. CHARLES STREET, SUITE 1500
BALTIMORE, MARYLAND, 21201-3724
PHONE: (410) 396-4377

February 2020

Trade Name: _____

Location Address: _____

Food Sales – Class “B” Beer, Wine & Liquor License in 46th Legislative District
March 2019 – February 2020

	Food Sales	Total Sales	Food %
March-19			
April-19			
May-19			
June-19			
July-19			
August-19			
September-19			
October-19			
November-19			
December-19			
January-20			
February-20			
TOTALS			

I solemnly affirm under the penalties of perjury that the information of this form is true to the best of my knowledge, information and belief.

Printed Name of Certified Public Accountant: _____

Signature: _____

I hereby certify that on the _____ day of _____, 20____, before me, the subscriber, a notary public of the State of _____ in and for _____, personally appeared _____ a certified public accountant named in this food form made oath in due form of law that the matter and facts contained in said document are true and correct. As witness, my hand and notarial seal.

Signature: _____

[Notary Seal]

My Commission expires: _____

Printed Name: _____