

HON. ALBERT J. MATRICCIANI, JR. (RET.)  
CHAIRMAN



DOUGLAS K. PAIGE  
EXECUTIVE SECRETARY

COMMISSIONERS  
AARON J. GREENFIELD, ESQ.  
ROBERT E. GUYE

NICHOLAS T.R. BLENDY, ESQ.  
DEPUTY EXECUTIVE SECRETARY

ALTERNATE COMMISSIONER  
HARVEY E. JONES

STACI L. RUSSELL  
ASSISTANT EXECUTIVE  
SECRETARY

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 2021

Trade Name: \_\_\_\_\_

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

Food Sales – Class “B” Beer, Wine & Liquor License in 46<sup>th</sup> Legislative District  
**March 2020 – February 2021**

	Food Sales	Total Sales	Food %
March-20			
April-20			
May-20			
June-20			
July-20			
August-20			
September-20			
October-20			
November-20			
December-20			
January-21			
February-21			
<b>TOTALS</b>			

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: \_\_\_\_\_