



# RL-37 Carrier's Report of Alcoholic Liquors Delivered

## Step 1: Identify your business

Business name \_\_\_\_\_

Report period: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Year

Address \_\_\_\_\_  
Number and street

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

## Step 2: Tell us about alcoholic liquors you delivered

Bill of lading or shipper invoice number	Date delivered	Shipper's name Street address City, state, ZIP	Consignee's name Street address City, state, ZIP	Number of containers	Number of gallons
____	____/____/____	_____ _____ _____	_____ _____ _____	_____	_____
____	____/____/____	_____ _____ _____	_____ _____ _____	_____	_____
____	____/____/____	_____ _____ _____	_____ _____ _____	_____	_____
____	____/____/____	_____ _____ _____	_____ _____ _____	_____	_____
____	____/____/____	_____ _____ _____	_____ _____ _____	_____	_____
____	____/____/____	_____ _____ _____	_____ _____ _____	_____	_____
____	____/____/____	_____ _____ _____	_____ _____ _____	_____	_____
____	____/____/____	_____ _____ _____	_____ _____ _____	_____	_____
____	____/____/____	_____ _____ _____	_____ _____ _____	_____	_____
____	____/____/____	_____ _____ _____	_____ _____ _____	_____	_____

