



### Common Carrier Quarterly Report

#### Part 1 - Common Carrier Information

Individuals, please state your legal name. Corporations or Limited Liability Companies, please state your name as it is filed with the State of Michigan Corporation Division.

|                         |        |           |
|-------------------------|--------|-----------|
| Common carrier name(s): |        |           |
| Address:                |        |           |
| City:                   | State: | Zip Code: |
| Contact name:           | Phone: | Email:    |

#### Part 2 - Reporting Requirements

Pursuant to MCL 436.1203(20), a common carrier that carries or transports alcoholic liquor in Michigan to a person in Michigan shall submit quarterly reports to the Commission. The report shall include all of the following about **each** delivery to a consumer in Michigan during the preceding calendar quarter:

- The name and business address of the person that ships beer, wine, and spirits.
- The name and address of the recipient of wine.
- The weight of beer, wine, and spirits delivered.
- The date of the delivery.

Pursuant to MCL 436.1203(21), a common carrier shall maintain the books, records, and documents supporting a quarterly report submitted under MCL 436.1203(20) for 3 years unless the Commission notifies the common carrier in writing that the books, records, and supporting documents may be destroyed. Within 30 days after the Commission's request, the common carrier shall make the books, records, and documents available for inspection during normal business hours. Within 30 days after a local law enforcement agency's or local governmental unit's request, the common carrier shall also make the books, records, and documents available for inspection to a local law enforcement agency or local governmental unit where the common carrier resides or does business.

1. Preceding Calendar Quarter Included In This Report:  Year:

2. Select a. or b. below and follow instructions for the option selected:

- a.  The common carrier **did not** deliver any beer, wine, or spirits in the preceding calendar quarter indicated in #1 above. Sign form below and submit to the Commission.
- b.  The common carrier **did** deliver beer, wine, or spirits in the preceding calendar quarter indicated in #1 above. Complete the attached quarterly reporting form report page, making additional copies as necessary to record **each** delivery to a consumer, sign the form below, and submit to the Commission.

#### Part 3 - Signature of Common Carrier

I certify that the information contained in this form is true and accurate to the best of my knowledge and belief. I agree to comply with all requirements of the Michigan Liquor Control Code and Administrative Rules. I also understand that providing **false** or **fraudulent** information is a violation of the Liquor Control Code pursuant to MCL 436.2003.

\_\_\_\_\_  
 Name of Common Carrier

\_\_\_\_\_  
 Signature of Common Carrier

\_\_\_\_\_  
 Date

Please return this completed form to:  
 Michigan Liquor Control Commission  
 Mailing address: P.O. Box 30005, Lansing, MI 48909  
 Hand deliveries or overnight packages: Constitution Hall - 525 W. Allegan, Lansing, MI 48933  
 Fax to: 517-763-0059

**Part 4 - Quarterly Reporting Form**

Make additional copies of this form as necessary to report **each** delivery of alcoholic liquor to a consumer in Michigan in the preceding calendar quarter as indicated in Part 2.

|      |    |
|------|----|
| Page | of |
|------|----|

|    |   |  |                              |
|----|---|--|------------------------------|
| 1. | Name and address of licensee shipping alcoholic liquor: |  | Weight of alcohol delivered: |
|    | Name and address of recipient of alcoholic liquor:      |  | Date of delivery:            |

|    |   |  |                              |
|----|---|--|------------------------------|
| 2. | Name and address of licensee shipping alcoholic liquor: |  | Weight of alcohol delivered: |
|    | Name and address of recipient of alcoholic liquor:      |  | Date of delivery:            |

|    |   |  |                              |
|----|---|--|------------------------------|
| 3. | Name and address of licensee shipping alcoholic liquor: |  | Weight of alcohol delivered: |
|    | Name and address of recipient of alcoholic liquor:      |  | Date of delivery:            |

|    |   |  |                              |
|----|---|--|------------------------------|
| 4. | Name and address of licensee shipping alcoholic liquor: |  | Weight of alcohol delivered: |
|    | Name and address of recipient of alcoholic liquor:      |  | Date of delivery:            |

|    |   |  |                              |
|----|---|--|------------------------------|
| 5. | Name and address of licensee shipping alcoholic liquor: |  | Weight of alcohol delivered: |
|    | Name and address of recipient of alcoholic liquor:      |  | Date of delivery:            |

|    |   |  |                              |
|----|---|--|------------------------------|
| 6. | Name and address of licensee shipping alcoholic liquor: |  | Weight of alcohol delivered: |
|    | Name and address of recipient of alcoholic liquor:      |  | Date of delivery:            |