



State of Arizona  
Department of Liquor Licenses and Control

**BUSINESS DATA REPORT**

THIS FORM IS REQUIRED TO RENEW SERIES 11 AND 12 LICENSES WHICH HAVE BEEN IN OPERATION FOR  
A PERIOD OF TWELVE MONTHS OR LONGER.

Licensee's Name: \_\_\_\_\_

D.B.A.: \_\_\_\_\_

License #: \_\_\_\_\_

Time period included in this report: \_\_\_/\_\_\_/\_\_\_ through \_\_\_/\_\_\_/\_\_\_  
mo day year mo day year

(please report your sales for the reporting period that include the 12 months preceding your license expiration date)

Sales Information			
Month/Year	Food Sales	Total Liquor Sales	Total Sales
Totals			

Inventory Value (most recent)					
	Food (exclude non-food items)	Beer	Wine	Liquor	Total
Dollar Amount					

I certify that all information presented on this report is true and accurate:

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

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Website: [www.azliquor.gov](http://www.azliquor.gov)

INDIVIDUALS REQUIRING ADA ACCOMMODATIONS CALL 602-542-2999