



MONTANA
HCT-2
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Hard Cider Retailer Monthly Report For Purchases from a Winery or Brewery Located Outside of Montana

Period Ending

License No.

Retailer Name

Address

Street City State Zip Code

Phone

Email

This report is for the preceding month and is due the 15th of each month. All records, invoices and delivery records must be kept for inspection by the Department of Revenue.

Hard Cider Merchandise Purchased

Invoice Date	Supplier	Supplier License No.	Brand	Invoice No.	Liters
Total Liters					

Return to: Montana Department of Revenue
Liquor Control Division
P O Box 1712
Helena, MT 59624-1712

I certify the above is true and correct.
Signed _____
Title _____



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