

**IOWA DEPARTMENT OF COMMERCE
ALCOHOLIC BEVERAGES DIVISION
1918 S. E. Hulsizer Road
Ankeny, Iowa 50021**

WINE (OVER 5% ALCOHOL BY WEIGHT,
6.25% BY VOLUME, OR 12.5 BY

PERMIT NO. _____
CERTIFICATE OF COMPLIANCE _____

DATE: _____

COMPANY _____

**REPORT OF SHIPMENTS
OF WINE
TO IOWA WHOLESALERS**

PREPARED BY _____

CONTACT PHONE _____

FAX NUMBER _____

RECAP FOR THE MONTH & YEAR OF _____ FOR WINE SHIPPED INTO THE STATE OF IOWA.
ONE SET OF FORMS (CV-1 & CV-2) IS REQUIRED EACH MONTH THAT THERE IS SHIPPING.

IOWA WINE WHOLESALER	DATE	INVOICE/ ORDER NO.	TOTAL CASES	TOTAL GALLONS	12/750 ML. Cases	12/1 LTR. Cases	6/1.5 LTR. Cases	4/3 LTR. Cases	4/4 LTR. Cases	4/5 LTR. Cases	1/18 LTR. Cases		
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TOTAL NO. CASES:													
TOTAL GALLONS BY SIZE:													