New York State Department of Taxation and Finance

MT-51 (3/98)

Beer and Similar Fermented Malt Beverages
Schedule C — Out-of-State Sales

File Two Copies

		Period covered by this schedule **Month:** **Year:**
Name	Beer tax registration number	Federal ID or social security number

Complete this schedule and send two copies with Form MT-50, *Return of Tax on Beer and Similar Fermented Malt Beverages*. Keep a third copy for your records.

Sales of beer transferred to purchaser at a point outside New York State in the state of: ______________________

A separate sheet must be used for each state into which deliveries were made during the above period.

Name and address of customer to whom beer was sold	Gallons sold during month
Total *(enter here and below on line 1)*	

1 Total *(from front page)*	
2 Total *(from back page and attached additional sheets)*	
3 Total *(enter here and on Form MT-50, line 10)*	

Name and address of customer to whom beer was sold	Gallons sold during month
Total *(enter here and on line 2 of front page)*	

Attach additional sheets if necessary