# STATE OF NEW JERSEY 

Sheet No. $\qquad$ of $\qquad$
$\qquad$ , and
, year $\qquad$
ALCOHOLIC BEVERAGE TRANSPORTATION SCHEDULE "N"
 which this Schedule is attached by $\qquad$ Transportation License No. $\qquad$ _.

Submit the original of this schedule with your original report. Keep a copy of this schedule attached to your file copy of the report.

| Date of Pick-up and Pro No. | Picked up at: Name \& Address of Licensed Premises, Warehouse, Railroad, Forwarding Company, Ship or Pier | Name \& Address of Consignor: (Actual Shipper, Not a Pier, Warehouse, or Transporter) | Name \& Address of Actual Consignee: (If Delivered to Public Warehouse. in New Jersey also give Name \& Address of Same) | $\qquad$ <br> Name and Address of Transporter | Date of Delivery | * Kind of Beverage | No. \& Kind of Pkgs., such as Bbl., Case, etc. | No. \& Size of Containers, 12/Qts., 24/Pts., Etc. |
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* IN COLUMN HEADED "KIND OF BEVERAGE" CLASSIFY AS EITHER BEER, LIQUOR, ALCOHOL, STILL WINES, VERMOUTH, SPARKLING WINES (including apple cider with more than $7 \%$ alcohol) or APPLE CIDER ( $3.2 \%$ to $7 \%$ alcohol).


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