## <sup>1</sup>[FORM A]

[See rule 9 (1-A)]

No.		during the month of			20 .	
Name of	the licensee					
Address						
Name of	the toilet prep	aration				
Date		pening alance	Quantity received		om whom eceived	Total [Column (2) and (3)]
(1)		(2)	(3)		(4)	(5)
Quantity sold To		whom sold	Closing balance Sign		ature of the icensee	Remarks
(6)		(7)	(8)		(9)	(10)
			FOR	RM B		
				e 9 (1-A)]		
	Monthly re	eturn of spi		et preparatio	ns received	and
Name of	the licensee					
Address						
S. M. P. I	II Licence No.					
Name of spirituous	Opening balance on	Quantity received	Total [Columns (2) and	Quantity sold during the month	Closing balar on the 1st da	ay the licensee
toilet	the 1st day of the month	during the month	(3)]			

<sup>1.</sup> Added. by G. N. of 14-7-1962.