Private Barrel Selection Form

Distillery or Vendor Name:				
Contact Name:	Phone:	E-n	nail:	
Broker Name (if any):				
Group, Individual, Private Club	or Retail Liquor Outl	et Requesting Private	Barrel Selection:	
Contact Name:	Phone:	E-n	E-mail:	
Names of Purchasers and/or Lice an additional page):				
Barrel Identification number (attac		able):		
Estimated Barrel Yield:	Proof:		Release Date:/_	/
Will Empty Barrel be shipped wi	th finished product:	Yes: 1	No:	
Price Per Bottle: Wholesale	_		ips and fees):	
By signing this form I certify that I	Date	Group Rep or I		Policy. Date
	FOR WVABC	A USE ONLY		
WVABCA Retail Liquor Outlet	receiving product:			
WVABCA Retail Outlet Number Address:				
Actual Barrel Yield:	Gallons:	Bottles:	Proof:	
Approval:				
Fredric L Wooton, Commissioner			Date	

Retail Liquor Outlet

WVABCA

Private Barrel Selection Form

Names of Purchasers and/or Licensee's involved in the Private I a second page):	Barrel Program (if more space is needed attach
Retail Liquor Outlet Responsibilities	
If the retail liquor outlet is the purchaser of the selected barrel and yield at their licensed premises only.	d its bottled yield, they may sell the bottled
If the retail liquor outlet was chosen by a private club, group or outlet to facilitate the further sale of the bottled yield they must for resale of the bottled Private Barrel Yield, including: • No one individual may purchase more than 30 be Retail liquor outlets must not structure transaction. • Under state law, purchasers may not transport mouse and not for resale.	follow all stated WVABCA requirements ottles of the Private Barrel Yield per visit. ns to circumvent the requirements.
Retail Liquor Outlet Licensee	Date
Approval: Fredric L Wooton, Commissioner	 Date