

ACTIVE LICENSE ROSTER

Name _____

Address _____

City _____ State _____ Zip _____

Indicate Format _____ MS Excel file by email _____ Paper Copy _____ Labels _____

Email Address _____

1. _____ License Roster x \$40.00. Enter Total. \$ _____
2. _____ State Sales Tax (Line 1 x .055) \$ _____
3. _____ City Sales Tax if applicable (Line 1 x city tax rate shown below) \$ _____

CITY SALES TAX TABLE Effective 02/01/2019

AINSWORTH 0.015	CLARKSON 0.015	GORDON 0.01	MCCOOK 0.015	RED CLOUD 0.015
ALBION 0.015	CLAY CENTER 0.01	GOTHENBURG 0.015	MCCOOL JUNCTION 0.015	REPUBLICAN CITY 0.01
ALLIANCE 0.015	CLEARWATER 0.015	GRAND ISLAND 0.015	MEADOW GROVE 0.015	RUSHVILLE 0.015
ALMA 0.02	COLUMBUS 0.015	GRANT 0.01	MILFORD 0.01	SARGENT 0.015
ARAPAHOE 0.01	CORDOVA 0.01	GREELEY 0.01	MINDEN 0.02	SCHUYLER 0.015
ARCADIA 0.01	CORTLAND 0.01	GREENWOOD 0.01	MITCHELL 0.015	SCOTTSBLUFF 0.015
ARLINGTON 0.015	COZAD 0.015	GRESHAM 0.015	MONROE 0.015	SCRIBNER 0.015
ARNOLD 0.01	CRAWFORD 0.015	GRETNA 0.015	MORRILL 0.01	SEWARD 0.015
ASHLAND 0.015	CREIGHTON 0.01	GUIDE ROCK 0.01	MULLEN 0.01	SIDNEY 0.02
ATKINSON 0.015	CRETE 0.02	HARRISON 0.01	MURRAY 0.01	SILVER CREEK 0.01
AUBURN 0.01	CROFTON 0.01	HARTINGTON 0.01	NEBRASKA CITY 0.02	SOUTH SIOUX CITY 0.015
BANCROFT 0.015	CURTIS 0.01	HARVARD 0.01	NELIGH 0.01	SPENCER 0.01
BASSETT 0.015	DAKOTA CITY 0.005	HASTINGS 0.015	NELSON 0.01	SPRINGFIELD 0.015
BATTLE CREEK 0.015	DAKOTA COUNTY 0.005	HAY SPRINGS 0.01	NEWMAN GROVE 0.015	SPRINGVIEW 0.01
BAYARD 0.01	DANNENBROG 0.01	HEBRON 0.01	NIobrara 0.01	STANTON 0.015
BEATRICE 0.015	DAVID CITY 0.02	HEMINGFORD 0.015	NORFOLK 0.015	ST EDWARD 0.01
BEAVER CITY 0.01	DAYKIN 0.01	HENDERSON 0.015	NORTH BEND 0.015	ST PAUL 0.01
BEAVER CROSSING 0.01	DECATUR 0.01	HICKMAN 0.015	NORTH PLATTE 0.015	STERLING 0.01
BEEMER 0.015	DEWEESE 0.01	HILDRETH 0.01	OAKLAND 0.01	STROMSBURG 0.015
BELLEVUE 0.015	DILLER 0.01	HOLDREGE 0.015	OCONTO 0.01	STUART 0.015
BELLWOOD 0.015	DODGE 0.015	HOOPER 0.01	ODELL 0.01	SUPERIOR 0.01
BENEDICT 0.015	DONIPHAN 0.01	HOWELLS 0.015	OGALLALA 0.015	SUTTON 0.015
BENKELMAN 0.015	DOUGLAS 0.015	HUBBELL 0.01	OMAHA 0.015	SYRACUSE 0.01
BENNET 0.01	DUNCAN 0.015	HUMPHREY 0.015	O'NEILL 0.015	TECUMSEH 0.015
BENNINGTON 0.015	EAGLE 0.01	HYANNIS 0.01	ORD 0.015	TEKAMAH 0.02
BERTRAND 0.01	EDGAR 0.01	IMPERIAL 0.01	OSCEOLA 0.015	TERRYTOWN 0.01
BIG SPRINGS 0.01	EDISON 0.01	JACKSON 0.015	OSHKOSH 0.02	TILDEN 0.015
BLAIR 0.015	ELGIN 0.01	JANSEN 0.01	OSMOND 0.01	UEHLING 0.01
BLOOMFIELD 0.01	ELM CREEK 0.01	JUNIATA 0.01	OXFORD 0.015	UPLAND 0.005
BLUE HILL 0.015	ELMWOOD 0.015	KEARNEY 0.015	PALMYRA 0.01	UTICA 0.015
BRAINARD 0.01	ELWOOD 0.01	KIMBALL 0.015	PAPILLION 0.02	VALENTINE 0.015
BRIDGEPORT 0.01	EUSTIS 0.01	LA VISTA 0.02	PAWNEE CITY 0.02	VALLEY 0.015
BROKEN BOW 0.015	EXETER 0.015	LAWRENCE 0.01	PAXTON 0.01	VERDIGRE 0.015
BROWNVILLE 0.01	FAIRBURY 0.02	LEIGH 0.015	PERU 0.01	WAHOO 0.02
BURWELL 0.015	FAIRFIELD 0.015	LEWELLEN 0.01	PETERSBURG 0.01	WAKEFIELD 0.01
CAIRO 0.01	FALLS CITY 0.015	LEXINGTON 0.015	PIERCE 0.01	WATERLOO 0.02
CALLAWAY 0.01	FARNAM 0.01	LINCOLN 0.015	PILGER 0.015	WAUSA 0.01
CAMBRIDGE 0.015	FORT CALHOUN 0.015	LINWOOD 0.01	PLAINVIEW 0.015	WAVERLY 0.01
CEDAR RAPIDS 0.01	FRANKLIN 0.01	LOOMIS 0.01	PLATTE CENTER 0.015	WAYNE 0.015
CENTRAL CITY 0.015	FREMONT 0.015	LOUISVILLE 0.015	PLATTSMOUTH 0.015	WEeping WATER 0.015
CERESCO 0.015	FRIEND 0.01	LOUP CITY 0.015	PLYMOUTH 0.015	WEST POINT 0.015
CHADRON 0.02	FULLERTON 0.015	LYONS 0.015	PONCA 0.015	WILBER 0.015
CHAMBERS 0.01	GENEVA 0.02	MADISON 0.015	RALSTON 0.015	WISNER 0.02
CHAPPELL 0.02	GENOA 0.015	MALCOLM 0.01	RANDOLPH 0.02	WOOD RIVER 0.015
CHESTER 0.01	GERING 0.015	MARQUETTE 0.015	RAVENNA 0.015	WYMORE 0.015
CLARKS 0.01	GIBBON 0.01	MAYWOOD 0.015		YORK 0.02

4. TOTAL AMOUNT DUE (ADD LINES 1, 2 AND 3) \$ _____

Make check payable to: NEBRASKA LIQUOR CONTROL COMMISSION
(DO NOT SEND CASH) P.O. BOX 95046
 or LINCOLN, NE 68509
Pay by credit card or EFT through PayPort at www.ne.gov/go/NLCCpayport

Website Address for additional forms: <https://lcc.nebraska.gov/order-forms>

In compliance with ADA, this form is available in other formats for persons with disabilities.
 A ten day advance period is requested in writing to produce the alternate format.