

Mississippi Secretary of State
700 North Street P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME Mississippi Department of Revenue		CONTACT PERSON Melinda R. Lott	TELEPHONE NUMBER 601-923-7309	
ADDRESS PO Box 1033		CITY Jackson	STATE MS	ZIP 39215
EMAIL melinda.lott@dor.ms.gov	SUBMIT DATE 12/29/15	Name or number of rule(s): Title 35, Part II, Subpart 04, Chapter 03 Payment		

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: Clarifying method of reporting requirements for permit holders to the commission, ABC.
Specific legal authority authorizing the promulgation of rule: Miss. Code Ann. Section 27-71-25, "It shall be the duty of the commission to prescribe and promulgate uniform rules and regulations for keeping such records and making such reports.

List all rules repealed, amended, or suspended by the proposed rule: Miss. Admin Rule 35.II.04.03

ORAL PROCEEDING:

An oral proceeding is scheduled for this rule on Date: 02/03/2016 Time: 3:00 p.m. Place: Mississippi Department of Revenue, 500 Clinton Center Drive, Clinton, MS 39056

Presently, an oral proceeding is not scheduled on this rule.

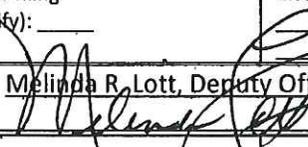
If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

ECONOMIC IMPACT STATEMENT:

Economic impact statement not required for this rule. Concise summary of economic impact statement attached.

TEMPORARY RULES	PROPOSED ACTION ON RULES	FINAL ACTION ON RULES
<input type="checkbox"/> Original filing <input type="checkbox"/> Renewal of effectiveness To be in effect in _____ days Effective date: <input type="checkbox"/> Immediately upon filing <input type="checkbox"/> Other (specify): _____	Action proposed: <input type="checkbox"/> New rule(s) <input checked="" type="checkbox"/> Amendment to existing rule(s) <input type="checkbox"/> Repeal of existing rule(s) <input type="checkbox"/> Adoption by reference Proposed final effective date: <input checked="" type="checkbox"/> 30 days after filing <input type="checkbox"/> Other (specify): _____	Date Proposed Rule Filed: _____ Action taken: <input type="checkbox"/> Adopted with no changes in text <input type="checkbox"/> Adopted with changes <input type="checkbox"/> Adopted by reference <input type="checkbox"/> Withdrawn <input type="checkbox"/> Repeal adopted as proposed Effective date: <input checked="" type="checkbox"/> 30 days after filing <input type="checkbox"/> Other (specify): _____

Printed name and Title of person authorized to file rules: Melinda R. Lott, Deputy Office Director, Tax Policy

Signature of person authorized to file rules: 

OFFICIAL FILING STAMP	DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP	OFFICIAL FILING STAMP
Accepted for filing by _____	 <p>Accepted for filing by <u>21710 AF</u></p>	Accepted for filing by _____

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.