

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
DEPARTMENT OF REVENUE
DIVISION OF TAXATION
ONE CAPITOL HILL
PROVIDENCE, RI 02908

EXCISE SECTION
REQUISITION FOR CIGARETTE TAX STAMPS
(CIGARETTE ROLLING PAPER STAMPS MUST BE ORDERED ON FORM T-11A)

DATE		
NAME		
ADDRESS		
CITY	STATE	ZIP CODE
DEALER OR DISTRIBUTOR (circle one)	LICENSE NUMBER:	
IS THIS A CASH OR CHARGE ORDER (circle one)	TELEPHONE NUMBER	
TAX OFFICE USE ONLY AUDIT [] USE TAX [] CARRIER []		

THIS SPACE FOR TAX
DIVISION USE ONLY

**PREPARE THIS ORDER IN DUPLICATE, KEEPING A COPY FOR YOUR FILES.
SUBMIT THE ORIGINAL TO THE DIVISION OF TAXATION AT TIME OF PURCHASE.**

(DO NOT COMBINE ORDERS FOR 20'S AND 25'S ON SAME FORM)

**UNLESS YOU HAVE ARRANGED CREDIT, ENCLOSE A REMITTANCE FOR
THE TOTAL AMOUNT OF THIS ORDER PAYABLE TO TAX ADMINISTRATOR**

*Please furnish the Cigarette Tax Stamps listed below:
All purchases must be made at the RI Division of Taxation, Cashier's Office*

			TAX DIVISION USE ONLY	
NUMBER OF STAMPS	DENOMINATIONS	VALUE	BEGINNING NUMBER	ENDING NUMBER
	Loose 20's @ \$ 3.46 per stamp			
	Loose 25's @ \$ 4.325 per stamp			
	Fusion Stamps			
# _____ Rolls	\$ 103,800.00 / Roll			
TOTAL FACE VALUE STAMPS				
1.25% DISCOUNT ALLOWED (LICENSED DISTRIBUTORS ONLY)				
NET STAMP ORDER				
PREPAID SALES TAX @ \$ 16,200.00 per roll x # of rolls				
PREPAID SALES TAX @ \$ 0.54 per stamp x # of stamps				
TOTAL VALUE OF ORDER				

**THIS ORDER WILL NOT BE FILLED
UNLESS SIGNED**

**THE UNDERSIGNED HAS RECEIVED THE CIGARETTE
ROLLING PAPER STAMPS LISTED ABOVE.**

Distributor or Dealer

Authorized Agent

Date

**#12 (cash)
#58 (credit)**