

RETURN DUE ON
OR BEFORE 20TH
OF EACH MONTH

CITY OF DAPHNE

TOBACCO/CIGARETTE EXCISE TAX

THIS RETURN IS FOR THE MONTH OF _____, 2003

Has a change occurred in Taxpayer Name, Trade Name, Mailing Address, Business Address or Number of Outlets? <input type="checkbox"/> YES <input type="checkbox"/> NO Is this return a Final Return? (If Yes, attach explanation) <input type="checkbox"/> YES <input type="checkbox"/> NO
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IF BUSINESS NAME IS IMPRINTED, THIS RETURN MAY BE USED ONLY FOR THE BUSINESS NAMED

Make Checks Payable to:

CITY OF DAPHNE

REMITTANCE:

City of Daphne
PO Box 1047
Daphne, AL 36526-1047

251-621-6613
251-621-6904

CORPORATE LIMITS

Tobacco products other than cigarettes 10% of the retail selling price.

Cigars 10% of the retail selling price.

Cigarettes containing more than 20 and not exceeding 40 per package – 4% per package of cigarettes.

CUSTOMER	TOTAL CARTONS SOLD	TOBACCO PRODUCTS	TAX RATIO	TOTAL TAX DUE
Detail Attached		CTN-20Cigarettes Per Package	.20 / Carton	
Detail Attached		CTN-20/40Cigarettes Per Package	.04 / each package	

CUSTOMER	TOTAL SOLD	TOBACCO PRODUCTS	TAX RATIO	TOTAL TAX DUE
Detail Attached		Cigars	10% Of Retail	
Detail Attached		All Other Tobacco Products	10% Of Retail	

- * Penalty Rate 20% of Tax
- ** Interest Rate 1% Each Month Delinquent

TOTAL TAX _____

PENALTY _____

INTEREST _____

TOTAL AMOUNT DUE: _____

OFFICE USE ONLY

BATCH # _____

CHECK # _____

AMOUNT _____

This return, including accompanying schedules or statements, has been examined by me and is to the best of my knowledge and belief a true and complete return made in good faith for the period stated.

Signature

Date