

Form T-11

Requisition for Cigarette Tax Stamps

Check one: <input type="checkbox"/> Cash order - Key #12 <input type="checkbox"/> Charge order - Key #58	Name		Federal employer identification number	
	Address		Requisition date	
	Address 2		License number	
	City, town or post office	State	ZIP code	Email address

**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 RI DIVISION OF TAXATION.**

Use Form T-11A to requisition cigarette tax stamps for rolling papers.

*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	
DENOMINATIONS	QUANTITY	VALUE	BEGINNING NUMBER	ENDING NUMBER
1 Loose 20's @ \$ 4.25 per stamp				
2 Loose 25's @ \$ 5.31 per stamp				
3 \$ 127,500.00 per roll				
4 Total face value of stamps. Add lines 1, 2 and 3				
5 1.25% discount. Multiply line 4 by 0.0125..... --- LICENSED DISTRIBUTORS ONLY ---				
6 Net stamp order. Subtract line 5 from line 4.....				
7 Prepaid sales tax @ \$ 17,400.00 per roll x # of rolls				
8 Prepaid sales tax @ \$ 0.58 per stamp x # of stamps				
9 TOTAL VALUE OF ORDER.....				

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, it is true, accurate and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Authorized officer signature	Print name	Date	Telephone number
Paid preparer signature	Print name	Date	Telephone number
Paid preparer address	City, town or post office	State	ZIP Code PTIN

May the Division of Taxation contact your preparer? YES