



MONTHLY TOBACCO TAX REPORT

Business Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Filing Period: Month _____, 20_____

Reports must be made by the 20th of the following month. Reports not turned in by the 20th will be charged a 10% penalty.

TOTALS

If business is operated within the city limits, complete this section.

1 - Gross income from cigarettes: Packs: _____ x 3¢ per pack = \$ _____

2 - Cigars, all other tobacco products: \$ _____ x 3% = \$ _____

If business is operated outside the city limits, but within Police Jurisdiction, complete this section.

3 - Gross income from cigarettes: Packs: _____ x 1.5¢ per pack = \$ _____

4 - Cigars, all other tobacco products \$ _____ x 1.5% = \$ _____

5 - Total Due (add lines 1-4): \$ _____

6 - Add penalty (10%) of Line 5, if applicable: \$ _____

7 - Total Net Due (add lines 5 & 6): \$ _____

STATE OF _____ COUNTY OF _____

Before me, _____, a Notary Public in and for said State and County, personally appeared _____ who being first only sworn, deposes and says as follows: That he/she has knowledge of the above report and statement and that the same is true and correct, and contains all sales made by said license in the City of Phenix City and within the Police Jurisdiction of the City of Phenix City, during the month of _____, 20_____.

Sworn and subscribed before me this _____ day of _____, 20_____.

NOTARY PUBLIC

COMPANY REPRESENTATIVE

