



**STATE of RHODE ISLAND and PROVIDENCE PLANTATIONS**  
**DEPARTMENT of REVENUE – DIVISION of TAXATION**  
 One Capitol Hill - Providence, RI 02908-5800  
**Excise Tax Section**

**Application for Refund of Cigarette Tax**

**This form to be executed only for refund payments made by Cigarette Tax section**

Name of Licensee \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Business Tel \_\_\_\_\_

Federal I.D.# \_\_\_\_\_ Distributor # \_\_\_\_\_

**To the Tax Administrator:** Application is hereby made for refund on the cigarette tax stamps or licenses shown below and for the reason stated in accordance with the provisions of Chapter 20 of Title 44 of the General Laws of 1956 as amended.

**Cigarettes:**

<u>Date</u>	<u>Denomination</u>	<u>Number of Stamps</u>	<u>Face Value of Stamps</u>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

Face Value of Stamps \_\_\_\_\_  
 Less 1.25% Discount \_\_\_\_\_  
 Refund at 98.75% \_\_\_\_\_  
 Total Refund to be allowed \$(\_\_\_\_\_)

**Little Cigars:**

<u>Sticks Per Stamp</u>	<u>Sticks per Pack sold</u>	<u>Total Sticks</u>	<u>Rate per Stick</u>	<u># of Packs</u>	<u>Amount</u>	<u>Refund Rate</u>	<u>Refund Amount</u>
<u>20</u>	-	_____	X <u>.175</u>	X _____	= _____	X <u>98.75%</u>	= _____

<u>Sticks Per Stamp</u>	<u>Sticks per Pack sold</u>	<u>Total Sticks</u>	<u>Rate per Stick</u>	<u># of Packs</u>	<u>Amount</u>	<u>Refund Rate</u>	<u>Refund Amount</u>
<u>20</u>	-	_____	X <u>.175</u>	X _____	= _____	X <u>98.75%</u>	= _____

**Refund is requested for the reasons checked:**

- Stamps mutilated
- \*Licensee discontinuing the affixing of Tax Stamps
- Cigarettes old, dry, and unsalable to be destroyed by manufacturer (attach original manufacturer affidavit(s))
- Other \_\_\_\_\_ (attach purchase invoices)

\*Redemption of unused cigarette Tax Stamps will be refunded at 98% of their face value

The undersigned hereby certifies that the information herein set forth is true and correct to the best of his knowledge and belief and that this statement is made under the penalties of perjury.

Date \_\_\_\_\_, 20\_\_\_\_ Signature \_\_\_\_\_