



Town Finance Office
CIGARETTE TAX STAMPS ORDER FORM

Applicant: _____

Mailing Address: _____

Fed Tax ID #: _____ **D/B/A Store Name** _____

Signature: _____ **Date:** _____

The above name applicant hereby applies to the Finance Director for the following number of rolls of Cigarette Tax Stamps:

Type of Stamp Purchased:	<u>Heat Applied</u>	<u>Self -Adhesive</u>
	(Sold only in rolls of 15,000)	(Sold only in sheets of 100)
Number of Stamps Purchased	_____	_____
Dollar Value @ \$.10 each	_____	_____
Less 3% Discount (x .03)	_____	_____
Total Stamp Cost	_____	_____
Mailing Fee \$5.00/roll or \$1.00/sheet		
(IF MORE THAN 2 ROLLS - PLEASE CALL)		
(N/A if billed to your FedEx Account)		
Total Due:	_____	_____

Please indicated your FedEx Account # if you want delivery by FedEx _____

If using FedEx account, do you want insurance? _____ Amount to insure? _____

Make Check Payable to Town of South Boston
Finance Office - 455 Ferry Street, South Boston, VA 24592

OFFICE USE ONLY -- Approved by Finance Director	
_____ Finance Director/Date	
Beginning Serial Numbers _____	Ending Serial Numbers _____
Date Payment Received _____	Amount Received \$ _____
Date Picked Up/Mailed _____	

Signature: _____

(Authorized Representative of Applicant)