

## **DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

DIVISION OF ALCOHOLIC BEVERAGES AND TOBACCO
1940 NORTH MONROE STREET • TALLAHASSEE FL 32399-1022

DBPR Form AB&T 4000A-305-1 Revised 6/09 61A-10.052 FAC Effective ( )

## **OUT-OF-STATE TOBACCO PRODUCTS WHOLESALE DEALER'S REPORT**

Prepare in TRIPLICATE. Submit ORIGINAL and FIRST COPY to the AUDITING OFFICE of the DIVISION OF ALCOHOLIC BEVERAGES AND TOBACCO. SECOND COPY is to be retained by the licensee. This report and payment must be filed in accordance with the provisions of Chapter 210, Florida Statutes, on or before the tenth day of the month following the month being reported. Make remittances payable to the "Division of Alcoholic Beverages and Tobacco". Distributors paying \$50,000 or more in excise taxes per year must remit tax payments through electronic funds transfer, as prescribed by Chapter 210.31, Florida Statutes.

Permit Name		Phone No. (	Permit No.				
Address		City	State	Zip			
Month Reported	Yr Reporting Period		through				
	This report is true and correct to the best of my knowledge.	edge and belief and is submitt	ted under penalty of p	erjury.			
	Typed or Printed Name	Authorized Signature					
	COMPUTA	TION OF TAX					
1.	NET TAXABLE SALES (Total Wholesale Sales	s Price from page 2)	\$				
2.	EXCISE TAX at 25% of Wholesale sales price	(Line 1 X .25)	\$				
3.	LESS: 1% COLLECTION ALLOWANCE (Lin	ne 2 X .01)	\$				
4.	EXCISE TAX DUE (Line 2 minus 3)		\$				
5.	SURCHARGE DUE AT 60% of Wholesale Sal	es Price (Line 1 X .60)	\$				
6.	TOTAL AMOUNT TO BE REMITTED WITH TI	HIS REPORT ( Line 4+ 5)	\$				

## DAB&T USE ONLY

	5/1541 562 51121												
REPORT RECEIPT		In'Is	EXCISE PAYMENT VERIFICATION		In'Is	SURCHARGE PMT VERIF		In'Is	FIELD REVIEW		In'Is		
Postmark Date			Receipt No.			Receipt No,			Initial Review Date				
Delivery Date			Payment Date			Payment Date			Amended Date				
Delinquency Action			Excise Tax Paid			Surcharge Paid			Amended Amount				