

CITY OF COLONIAL HEIGHTS, VIRGINIA

BILLING AND COLLECTIONS OFFICE
201 JAMES AVENUE
COLONIAL HEIGHTS, VA 23834

PHONE (804) 520-9320
FAX (804) 520-9253

CIGARETTE TAX STAMPS ORDER FORM

APPLICANT: _____

MAILING ADDRESS _____

FEIN: _____ CIGARETTE TAX LIC. NO.: _____

CONTACT NAME: _____ PHONE: _____

SIGNATURE: _____

THE ABOVE-NAMED APPLICANT HEREBY APPLIES FOR THE FOLLOWING CIGARETTE TAX STAMPS:

HEAT SEALED STAMPS

NO. OF ROLLS _____ X 15,000 STAMPS PER ROLL = _____ STAMPS (MUST PURCHASE WHOLE ROLLS)

NUMBER OF STAMPS _____ @ \$0.35 EACH = \$ _____

LESS DISCOUNT: STAMPS _____ @ \$0.01 EACH = - _____

AMOUNT DUE \$ _____

STICKER-STYLE STAMPS

NO. OF SHEETS _____ X 80 STAMPS PER SHEET = _____ STAMPS (MUST PURCHASE WHOLE SHEETS)

NUMBER OF STAMPS _____ @ \$0.35 EACH = \$ _____

LESS DISCOUNT: STAMPS _____ @ \$0.01 EACH = - _____

TOTAL TAX \$ _____

TOTAL AMOUNT ENCLOSED \$ _____

A UPS OR FED EX ACCOUNT NUMBER MUST BE PROVIDED IF THE STAMPS ARE NOT BEING PICKED UP IN PERSON

Please make checks payable to City of Colonial Heights

OFFICE USE ONLY

SIGNATURE _____ DATE _____

BOX NUMBER(S) _____

DATE PAYMENT RECEIVED: _____ AMOUNT RECEIVED: _____

DATE PICKED UP: _____ DATE MAILED: _____

SIGNATURE: _____ FED EX/ UPS NUMBER: _____

(AUTHORIZED REPRESENTATIVE OF COMPANY TO PICK UP STAMPS)