



NYC CIGARETTE TAX PAYMENT FORM

Mail to: NYC Department of Finance, Sheriff Division, CTX Unit, 30-10 Starr Ave., 2nd Fl., Long Island City, NY 11101

Instructions: To insure proper credit, detach the bottom portion and return it with your check or money order made out to **NYC Department Of Finance**. Please put your social security number or federal tax identification number in the space provided below and on the check or money order.

Indicate the total Number of Untaxed Cartons purchased: # Cartons: _____

Indicate the name of the Internet Company _____

Indicate the period cartons were purchased From: ____/____/____ Through: ____/____/____

Excise Tax Per Carton \$ _____

Total New York City Tax Due \$ _____

(Multiply number of cartons by \$15.)

=====

Tracking #: _____



PAYMENT COUPON

Complete the payment coupon and detach and mail your payment to:

NYC Department of Finance, Sheriff Division, CTX Unit, 30-10 Starr Ave., 2nd Fl., Long Island City, NY 11101

Keep a copy of the coupon and the tracking number for your records.

Your tracking number will be requested in all correspondence and should be indicated with your payment(s).

Tracking #: _____ TAXPAYER NAME: _____

ADDRESS:

BOROUGH, STATE, ZIP:

SSN/EIN: _____

Total# of Cartons purchased: _____

Tax per carton: \$ _____

NYC Cigarette Tax Due: \$ _____

(Multiply number of cartons by \$15.) =====

Total Remittance: \$ _____

**It is your responsibility to mail a monthly payment until the entire liability is paid.
A copy of this payment coupon must accompany your payment(s)**