



**REPORT OF CHANGES IN PERSONNEL, MOTOR VEHICLES, AND LOCATION OF VENDING MACHINES**

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

**Instructions:** This form is used by all agent-jobbers, sub-jobbers and vending machine operators to report all changes in personnel (sales personnel, service personnel, etc.), motor vehicles, and locations of vending machines as required by the wholesale cigarette dealer's license issued to you by the City of New York. Under DELETIONS, list information from schedules you submitted previously that should be removed. Under ADDITIONS, list information that should be added to the most recently submitted schedule.

Date: \_\_\_\_\_ NYC License #: \_\_\_\_\_

Licensee Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Number and Street

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**DELETIONS**

**ADDITIONS**

DELETIONS	ADDITIONS

Name of Officer/Partner: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_