



Oregon
In-State Cigarette Distributor
Quarterly Reconciliation Report
Tax Year 2015

Department use only
Date received

Due date is on or before the 20th day following this reporting period

Quarter ending	License number	Federal employer identification number (FEIN)	Business identification number (BIN)
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Distributor

Address	City	State	ZIP code
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	20-pack	25-pack
Part 1 – Cigarette stock summary	Number of packs	Number of packs
1. Beginning inventory of unstamped cigarettes (from line 3, previous return).		
2. Total cigarettes received from manufacturers (attach Schedule A, Report of Cigarettes Received, 150-105-053).		
3. Subtract ending inventory of unstamped cigarettes (include those cigarettes with other states' stamps affixed).		
4. Total cigarettes distributed during reporting period.		
5. Subtract cigarette distribution and prestamped cigarettes (attach Schedule C, <i>Cigarette Distribution Report</i> , 150-105-052).		
6. Oregon taxable distribution.		
Part 2 – Quantity of unaffixed stamps	Number of stamps	Number of stamps
7. Beginning quantity of unused stamps (from line 9, previous return).		
8. "Total quantity of Stamps Purchased" from Stamp Purchase Schedule on page 2.		
9. Subtract ending quantity of unused stamps.		
10. Subtotal quantity of stamps used during reporting period.		
11. Subtract quantity of stamps that were verified as canceled and refunded by a Department of Revenue agent.		
12. Total quantity of stamps used during reporting period.		
13. Difference: Line 6 minus line 12		

Under penalties for false swearing [ORS 305.990(4)], I declare that I have examined this report, including accompanying schedules and statements. To the best of my knowledge and belief, it is true, correct, and complete.

Signature	Date
X	
Title	Phone

Send to: Cigarette Tax, Oregon Department of Revenue, PO Box 14110, Salem OR 97309-0910

