



pennsylvania
DEPARTMENT OF REVENUE

BUREAU OF BUSINESS TRUST FUND TAXES
PO BOX 280909
HARRISBURG PA 17128-0909

**NONRESIDENT STAMP
AFFIXING AGENCY MONTHLY
REPORT OF CIGARETTES
AND CIGARETTE TAX STAMPS**

Please print or type.

FEDERAL EIN _____
NAME _____
ADDRESS _____

CSA Number _____
Report Month _____
Date Submitted _____

Reporting instructions (REV-1036 Instructions) are available online at www.revenue.pa.gov

LINE	STAMPED CIGARETTE ACCOUNT	CIGARETTES*	FOR DEPARTMENT USE ONLY AUDIT	DO NOT USE THIS SPACE FOR DEPARTMENT USE ONLY
1	Pennsylvania stamped cigarettes on-hand beginning of month			
2	Number of cigarettes Pennsylvania stamped during month from Line 21			
3	Pennsylvania stamped cigarettes received during month - Schedule A			
4	Total (Add Lines 1, 2 and 3.)			
5	Pennsylvania stamped cigarettes on hand at end of month			
6	Total to be accounted for (Subtract Line 5 from Line 4.)			
7	Unstamped cigarettes sold to exempt organizations - Schedule C (DAS-34)			
8	Stamped cigarettes sold into Pennsylvania during month - Schedule D (REV-1032, REV-1032A)			
9	Other credits (Attach supporting statement.)			
10	Total cigarettes sold into PA and credits subject to tax (Add Lines 8 and 9.)			
11	Sales over and under (Subtract Line 6 from Line 10.)			

PA CIGARETTE TAX STAMP ACCOUNT

LINE	DESCRIPTION	2.60	3.25	1.30	\$ VALUE
12	Opening inventory				
13	Purchased from department				
14	Additional purchases (Subject to prior departmental approval.)				
15	Total (Add Lines 12, 13 and 14.)				
16	Returned to department or restamped				
17	Closing inventory				
18	Total Lines 16 and 17				
19a	PA tax stamps used for cigarettes				
19b	PA tax stamps used for little cigars				
19c	Total PA tax stamps used (Subtract Line 18 from Line 15.)				
20	Convert to sticks	X 20	X 25	X 10	
21	Number of sticks stamped (Enter number on Line 2.)				

* Includes stampable little cigars.

I declare under penalties of perjury this monthly report, including any accompanying statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete monthly report.

Signature of Officer or Owner

Title

