REV-1047 AS (5-05)



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF REVENUE
CIGARETTE TAX UNIT
PO BOX 280909
HARRISBIJIG PA 17128-0909

SCHEDULE F

(SUBMIT WITH REV-1030 – MONTHLY REPORT OF CIGARETTES AND CIGARETTE TAX STAMPS)

MONTH	YEAR

HARRISBURG, PA 17128-0909							
PLEASE PRINT OR TYPE							
NAME OF CSA	CSA LICENSE NUMBER	TOTAL NUMBER OF VENDING MACHINES ON LOCATION IN PA					

SECTION 1	SALES OF PENNSYLVANIA STAMPED CIGARETTES	
LINE NUMBER	SALES OF PENNSYLVANIA STAMPED CIGARETTES	TOTAL NUMBER OF CIGARETTES
1	Sales - Through Vending Machines	
2	Sales – To Retail Licensees and Consumers	
3	Sales - To Wholesale Licensees (list sales to wholesalers below)	
4	Total Sales of PA Stamped Cigarettes (Enter this total on REV-1030, section #3, line 11.)	

SECTION 2	SALES TO WE	HOLESALERS				
NAME OF WHOLE	SALER	ADDRESS	CITY	STATE	ZIP CODE	TOTAL NUMBER OF CIGARETTES

SECTION 2 SALES TO WH	OLESALERS - Continued				
NAME OF WHOLESALER	ADDRESS	CITY	STATE	ZIP CODE	TOTAL NUMBER OF CIGARETTES
			#4 11 °		TOTAL
TOTAL SALES TO WHOLESALE LI	CENSEES (Enter this total on fron	t of this form. section	on #1, line 3.	.)	TOTAL