

KANSAS DEPARTMENT OF REVENUE  
**MANUFACTURER'S SAMPLE PRODUCT**  
**CIGARETTE TAX RETURN**

\_\_\_\_\_, a manufacturer, has given \_\_\_\_\_ free  
 (Name of Business) (Number of Packs)  
 samples away in the state of Kansas for the month and year of \_\_\_\_\_.  
 (Month, Year)

	Number of Packs
X _____ \$ 1.29	Tax Rate
\$ _____	Amount of Tax Due

\_\_\_\_\_  
 (Signature)

\_\_\_\_\_  
 (Date)

\_\_\_\_\_  
 (Title)

\_\_\_\_\_  
 (Phone Number)

Submit this with your remittance if you give any sample products away in the state of Kansas to the Kansas Department of Revenue by the 10<sup>th</sup> day of the month following the reporting month to: Cigarette Tobacco, PO Box 758573, Topeka, KS 66675-8573.

If you need any additional copies you can find them at: <http://ksrevenue.org/bustaxtypescig.html> or have questions, please contact Cigarette Tobacco at 785-368-8222 or email [kdor\\_cigtob@ks.gov](mailto:kdor_cigtob@ks.gov)