



MISSOURI DEPARTMENT OF REVENUE
TAXATION DIVISION
P.O. BOX 811
JEFFERSON CITY, MISSOURI 65105-0811

CIGARETTE DECAL PURCHASE ORDER FORM

FORM

4405

(REV. 02-2012)

DOR USE ONLY

DLN NUMBER _____

INVOICE DATE _____

PAYMENT DUE ON
CREDIT PURCHASES \$ _____

WHOLESALER _____

LICENSE NUMBER _____

STREET _____

CITY, STATE, ZIP CODE _____

E-MAIL _____

TELEPHONE NUMBER
(____) _____ - _____

FAX NUMBER
(____) _____ - _____

SHIPPING METHOD (WHOLESALER MUST PAY)

- ☐ UPS
☐ UPS NEXT DAY AIR
☐ FEDERAL EXPRESS PRIORITY OVERNIGHT
☐ FEDERAL EXPRESS STANDARD OVERNIGHT
☐ DHL
☐ PICK-UP
☐ OTHER (SHIPPER NOT LISTED ABOVE)

NAME _____

PLEASE PROVIDE ACCOUNT NUMBER

PAYMENT TERMS FOR DECALS

- ☐ CASH
☐ CREDIT
☐ ON-LINE

DECAL DESCRIPTION	COLUMN A MISSOURI STATE COST LESS APPLICABLE DISCOUNT*	COLUMN B JACKSON COUNTY COST LESS APPLICABLE DISCOUNT*	COLUMN C ST. LOUIS COUNTY COST (NO DISCOUNT ALLOWED)	COLUMN D NUMBER OF ROLLS ORDERED— MUST BE FULL ROLLS	COLUMN E STATE COST FOR DECALS (COLUMN A TIMES NUMBER OF ROLLS IN COLUMN D)	COLUMN F JACKSON COUNTY COST FOR DECALS (COLUMN B TIMES NUMBER OF ROLLS IN COLUMN D)	COLUMN G ST. LOUIS COUNTY COST FOR DECALS (COLUMN C TIMES NUMBER OF ROLLS IN COLUMN D)
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20 PACKS OF CIGARETTES

STATE STAMP — 4,000	\$ 659.60		\$		\$		
STATE STAMP — 30,000	\$4,947.00		\$		\$		
STATE/JACKSON COUNTY STAMP — 4,000	\$ 659.60	\$ 196.00			\$	\$	
STATE/JACKSON COUNTY STAMP — 30,000	\$4,947.00	\$1,470.00			\$	\$	
STATE/ST. LOUIS COUNTY STAMP — 4,000	\$ 659.60		\$ 200.00		\$		\$
STATE/ST. LOUIS COUNTY STAMP — 30,000	\$4,947.00		\$1,500.00		\$		\$

25 PACKS OF CIGARETTES

STATE STAMP — 4,000	\$ 824.50				\$		
STATE/JACKSON COUNTY STAMP — 4,000	\$ 824.50	\$ 245.00			\$	\$	
STATE/ST. LOUIS COUNTY STAMP — 4,000	\$ 824.50		\$ 250.00		\$		\$

COLUMN TOTALS ➡

\$	\$	\$
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(COLUMN E) (COLUMN F) (COLUMN G)

- | | |
|---|---|
| 1. JACKSON COUNTY SUBTOTAL DUE (COLUMN F).....\$ _____ | 7. STATE SUBTOTAL DUE (COLUMN E)\$ _____ |
| 2. LESS CREDIT AFFIDAVITS (FROM BACK OF FORM)\$ _____ | 8. LESS CREDIT AFFIDAVITS (FROM BACK OF FORM)\$ _____ |
| 3. TOTAL DUE JACKSON COUNTY\$ _____ | 9. TOTAL DUE STATE\$ _____ |
| 4. SUBTOTAL DUE ST. LOUIS COUNTY (COLUMN G).....\$ _____ | 10. LESS PAYMENT RECEIVED WITH PURCHASE ORDER..\$ _____ |
| 5. LESS CREDIT AFFIDAVITS (FROM BACK OF FORM)\$ _____ | |
| 6. TOTAL DUE ST. LOUIS COUNTY\$ _____ | |

TOTAL AMOUNT DUE ON COUNTY DECALS **

\$

(TOTAL OF LINES 3 AND 6 — MUST BE PAID AT TIME OF PURCHASE)

TOTAL AMOUNT DUE ON STATE DECALS**

(TOTAL FROM LINE 9 MINUS LINE 10)

(CREDIT PURCHASES MUST BE PAID BY 15TH OF NEXT MONTH)

\$

COUNTY CHECK NO. _____

STATE CHECK NO. _____

*IF DISCOUNT IS DISALLOWED, COST WILL BE ADJUSTED BY ADDING 3% TO STATE COST AND 2% TO JACKSON COUNTY COST

**SEPARATE CHECKS MUST BE SUBMITTED FOR STATE AND COUNTY

If you pay by check, you authorize the Department of Revenue to process the check electronically. Any check returned unpaid may be presented again electronically.

I declare under penalties of perjury that I employ no illegal or unauthorized aliens as defined under federal law and that I am not eligible for any tax exemption, credit or abatement if I employ such aliens.

SIGNATURE OF PERSON COMPLETING DECAL ORDER FORM

PRINT NAME

DATE

____/____/____

SEND TO: TAXATION DIVISION, EXCISE TAX, P.O. BOX 811, JEFFERSON CITY, MISSOURI 65105-0811. If you have questions or need assistance in completing this form, please call (573) 751-7163 or email excise@dor.mo.gov. You may also obtain this form from the Department's web site at: <http://dor.mo.gov/forms/index.php?category=14>. TDD (800) 735-2966

LIST INFORMATION BELOW FOR MANUFACTURER RETURN AFFIDAVITS. ATTACH ORIGINAL AFFIDAVITS TO ORDER FORM TO RECEIVE CREDIT.			
INFORMATION ON PACKAGES OF 20 CIGARETTES			
STATE DECALS	ENTER NO. OF PACKAGES	STATE COST (LESS 3% DISCOUNT)	TOTAL CREDIT ALLOWED FOR STATE DECALS
		TOTAL NO. OF PACKAGES TIMES \$0.1649 =	\$ (ENTER ON LINE 1 BELOW)
JACKSON COUNTY	ENTER NO. OF PACKAGES	JACKSON COUNTY COST (LESS 2% DISCOUNT)	TOTAL CREDIT ALLOWED FOR JACKSON COUNTY
		TOTAL NO. OF PACKAGES TIMES \$0.049 =	\$ (ENTER ON LINE 3 BELOW)
ST. LOUIS COUNTY	ENTER NO. OF PACKAGES	ST. LOUIS COUNTY COST (NO DISCOUNT ALLOWED)	TOTAL CREDIT ALLOWED FOR ST. LOUIS COUNTY
		TOTAL NO. OF PACKAGES TIMES \$0.05 =	\$ (ENTER ON LINE 5 BELOW)
INFORMATION ON PACKAGES OF 25 CIGARETTES			
STATE DECALS	ENTER NO. OF PACKAGES	STATE COST (LESS 3% DISCOUNT)	TOTAL CREDIT ALLOWED FOR STATE DECALS
		TOTAL NO. OF PACKAGES TIMES \$0.206125 =	\$ (ENTER ON LINE 2 BELOW)
JACKSON COUNTY	ENTER NO. OF PACKAGES	JACKSON COUNTY COST (LESS 2% DISCOUNT)	TOTAL CREDIT ALLOWED FOR JACKSON COUNTY
		TOTAL NO. OF PACKAGES TIMES \$0.06125 =	\$ (ENTER ON LINE 4 BELOW)
ST. LOUIS COUNTY	ENTER NO. OF PACKAGES	ST. LOUIS COUNTY COST (NO DISCOUNT ALLOWED)	TOTAL CREDIT ALLOWED FOR ST. LOUIS COUNTY
		TOTAL NO. OF PACKAGES TIMES \$0.0625 =	\$ (ENTER ON LINE 6 BELOW)
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p>1. STATE TOTAL FOR 20s..... \$ _____</p> <p>2. STATE TOTAL FOR 25s..... \$ _____</p> <p>TOTAL STATE CREDIT ALLOWED \$ _____ (ENTER ON PAGE 1, LINE 8)</p> <p>3. JACKSON COUNTY TOTAL FOR 20s..... \$ _____</p> <p>4. JACKSON COUNTY TOTAL FOR 25s..... \$ _____</p> <p>TOTAL JACKSON COUNTY CREDIT ALLOWED \$ _____ (ENTER ON PAGE 1, LINE 2)</p> </div> <div style="width: 48%;"> <p>5. ST. LOUIS COUNTY TOTAL FOR 20s..... \$ _____</p> <p>6. ST. LOUIS COUNTY TOTAL FOR 25s..... \$ _____</p> <p>TOTAL ST. LOUIS COUNTY CREDIT ALLOWED \$ _____ (ENTER ON PAGE 1, LINE 5)</p> </div> </div>			
FOR DEPARTMENT OF REVENUE USE ONLY			
20 CIGARETTES			
TYPE ORDERED	CIGARETTE DECALS ORDERED	BEGINNING SERIAL NUMBER	ENDING SERIAL NUMBER
.17 DECALS	ROLLS X 4,000		
	ROLLS X 30,000		
.22 STATE/ JACKSON CO.	ROLLS X 4,000		
	ROLLS X 30,000		
.22 STATE/ ST. LOUIS COUNTY	ROLLS X 4,000		
	ROLLS X 30,000		
25 CIGARETTES			
TYPE ORDERED	CIGARETTE DECALS ORDERED	BEGINNING SERIAL NUMBER	ENDING SERIAL NUMBER
.2125 DECALS	ROLLS X 4,000		
.275 STATE/ JACKSON CO.	ROLLS X 4,000		
.275 STATE/ ST. LOUIS COUNTY	ROLLS X 4,000		
SHIPPING CLERK		DATE SHIPPED	TRACKING NUMBER
		____ / ____ / ____	
SIGNATURE OF PERSON PICKING DECALS UP AT RECORD CENTER			DATE PICKED UP
			____ / ____ / ____