



DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

DIVISION OF ALCOHOLIC BEVERAGES AND TOBACCO
 2601 BLAIR STONE ROAD • TALLAHASSEE FL 32399-1022

DBPR Form AB&T
 4000A-255
 Page 2 of 4
 Revised 02/08
 61A-10.0091 FAC

INSTATE CIGARETTE IMPORTER'S RECEIPT DETAIL REPORT

Permit Name _____ of _____ FL Permit No. _____

For the Month of _____ Yr _____ Reporting Period _____ through _____

DETAIL OF RECEIPTS

Entry No. (7501)	Entry Date (7501)	Cigarette Country of Origin (7501)	Name and Address of Supplier	Commercial Invoice No.	NUMBER OF PACKS		
					10's	20's	25's
Transaction Total (Transfer total to line 2 on page 1)							

NOTE: Attach copies of 7501's & Commercial Invoices