



**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  
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 Revised 02/08  
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**INSTATE CIGARETTE IMPORTER'S RETURN DETAIL REPORT**

Permit Name \_\_\_\_\_ of \_\_\_\_\_ FL Permit No. \_\_\_\_\_

For the Month of \_\_\_\_\_ Yr \_\_\_\_\_ Reporting Period \_\_\_\_\_ through \_\_\_\_\_

**DETAIL OF RETURNS FROM DISTRIBUTORS**

*\*Record Florida permit number for Florida distributors returning product.*

				NUMBER OF PACKS					
				10's		20's		25's	
Permit No.	FLORIDA DISTRIBUTOR Name and Address	Invoice No.	Date Received	Stamped	Unstamped	Stamped	Unstamped	Stamped	Unstamped
<b>Transaction Total</b> (Transfer total of stamped and unstamped to page 1, line 3)									

