CG-2	25
Rev.	8-19

KANSAS DEPARTMENT OF REVENUE PO Box 750680 Topeka, Kansas 66625-0680

ORDER FORM FOR CIGARETTE TAX INDICIA						
				FOR OFFICE USE ONLY		
Trade Name				Invoice No.		
Street Address				Date Issued		
City, State, Zip				Stamp No		
Date Ordered					Charge Purchase Cash Purchase	
	# of Rolls	Gross Amount	Discount .55%	Net Amount		
Fuson - 20s					Fed Ex	
Fuson - 25s					Account Number	
			Total Due		UPS	
Signature						