

**Comanche Nation Tax Commission**

**P.O Box 1917  
Lawton, OK 73502  
8-11-09**

**FORM 801 TOBACCO RETAILER'S /WHOLESALE'S MONTHLY REPORT OF CIGARETTE  
AND TOBACCO SALES AND REMITTANCE OF TAXES COLLECTED**

<u>Taxpayer FEIN/SSN</u>	<u>Reporting Period</u>	<u>Reporting Number</u>	<u>Tobacco Tribal License #</u>

Distributor's Name: \_\_\_\_\_

Smokeshop Name: \_\_\_\_\_

City: \_\_\_\_\_

Smokeshop Location: \_\_\_\_\_

Tribe Name: \_\_\_\_\_

Smokeshop City: \_\_\_\_\_

<b>Invoice</b>		<b>Factory List Price</b>		<b>Number of Cigars</b>	
<b>Date</b>	<b>Number</b>	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>
		<b>Smoking Tobacco</b>	<b>Chewing Tobacco</b>	<b>Little Cigars</b>	<b>Class C Cigars</b>
<b>1. TOTALS</b>					
<b>2. 2008 TAX RATE</b>		<b>11.68%</b>	<b>8.76%</b>	<b>\$0.005256 per cigar</b>	<b>\$0.01752 per cigar</b>
<b>3. 2008 TAX DUE</b>		<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>
<b>TOTAL TAX DUE (Add Line 3 Columns A, B, C, and D)</b>					

**\*\*PLEASE ATTACH DETAILED REPORT OF ALL PRODUCTS SOLD\*\***

**FORM 801**