Form

OR-514

2024

Oregon Unlicensed Cigarette and Little Cigar Monthly Tax Report (For unlicensed individual or business)

Due date is the 20th of the month following purchase

Revenue use only
Date received
 Payment received

Period end date	Federal employer identification number (FEIN)				Social Security number (SSN)					Oregon license number		
Business name (complete if reporting with a FE	N)											
First name (complete if reporting with a SSN) Initial Last name												
Address					City State ZIP code							
Contact person	Contact phone											
Amended New name New mailing address												
list all sticks purchased for the	month you	oro r	onorting /	(add additio	onal pages if ne	oodod):						
List all sticks purchased for the month you are reporting (add addition					· · · · · · · · · · · · · · · · · · ·		D. Numbe		E. Packs	F. Sticks	G. Total number	
A. Cigarette or little cigar distributor			B. Nu	umber	C. Date	cartons	-	er carton	per pack	of sticks		
								х		х	=	
								х		х	=	
						х		х	=			
								х		X	=	
								Х		Х	=	
					1. Total n	umber of sticks	add numb	ers in co	lumn G)	1		
	2. Tax rate (per sticks)											
3. Tax due (multiply line 1 by line 2)●3.												
4. Penalty and interest (see instructions)4.												
5. Total due (add lines 3 and 4)												
					Declaration							
I declare under the penalties for false	swearing [Ol	RS 305	5.990(4)] tha	at I have exa	mined this docu	ment and to the	e best of my	knowled	lge it is true		mplete.	
Signature										Date		
Print name	Title					Phone	Phone					
450, 405, 040 (Days 00, 00, 00, 112)										ı		