Form OR-511-IN

## Oregon In-state Cigarette Distributor Quarterly Reconciliation Report Tax Year 2022



For Revenue use only

Date received

Due date is by the 20th day following this reporting period.

The report must be filed quarterly, even if there is no activity during the quarter.

Period end date	Federal employer ID number (FEIN)	Social	Social security number (SSN)		Oregon license or account number	
Business name (complete if	reporting with a FEIN)					
First name (complete if repo	arting with a SSNI	Initial	Last	name		
r inst name (complete il repo	nting with a SSIV)	IIIIidi	Lasi	liame		
DBA/ABN						
Address						
City					State	ZIP code
Contact person					Contact phone	
Amended	New name	New ma	ailing a	address		
				20-pack		25-pack
Part 1-Cigarette sto				Number of packs	N	umber of packs
	bry of unstamped cigarettes					
(from your previou						
	ceived from manufacturers and supplie	ers				
(attach Schedule						
3. Add customer ret	urns (unstamped and other state stam	pea).				
4 Subtract ending in	nventory of unstamped cigarettes					
•	arettes with other states' stamps affixe	ed)				
	istributed during reporting period.	50).				
o. Total olgarottoo a	is the dating reporting policit.					
6. Subtract tax-exer	npt cigarette distribution and prestamp	bed				
cigarettes (attach Schedule OR-CIG-C).						
7. Oregon taxable cigarette distribution.						
Part 2_I ittle cigar s	tock summary			Number of packs	N	umber of packs
Part 2—Little cigar stock summary 8. Beginning inventory of unstamped little cigars (from your previous						
return).						
9. Add little cigars re	eceived from manufacturers and suppli	iers				
(attach Schedule OR-LC-A).						
10. Add customer returns (unstamped and other state stamped).						
11. Outstand an allow i		li i al a				
11. Subtract ending inventory of unstamped little cigars (include						
those little cigars with other states' stamps affixed).						
12. Total little cigars distributed during reporting period.						
13. Subtract tax-exer	npt little cigars distribution and prestar	mped little				
cigars (attach Schedule OR-LC-C).						
14. Oregon taxable little cigars distribution.						

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Part 3—Quantity of unaffixed stamps		Number of stamps	Number of stamps
15. Beginning quanti previous return).	ty of unused stamps (from your		
16. Add "total quanti purchase schedu	ty of stamps purchased" from the stamp le on page 3.		
17. Subtract ending	quantity of unused stamps.		
18. Subtotal quantity	of stamps used during reporting period.		
1 2	of stamps that were verified as canceled a Department of Revenue agent.		
20. Total quantity of s	stamps used during reporting period.		
21. Difference: Line 7	' plus line 14 minus line 20.		

Under penalties for false swearing [ORS 305.990(4)], I declare that I have examined this report, including accompanying schedules and statements. To the best of my knowledge and belief, it is true, correct, and complete.

Signature	Date
X	
Title	Phone

Send to: Cigarette Tax, Oregon Department of Revenue, PO Box 14110, Salem OR 97309-0910



Stamp purchase schedule Quantity of stamps purchased during this quarterly reporting period (List by date and quantity)

Date purchased	<b>20-pack</b> Number of stamps	<b>25-pack</b> Number of stamps
Total quantity of stamps purchased for this quarter		