Schedule 4 (Form WV/TPT-709)

Receipts of Stamped Cigarettes – Authorized Distributions

(Submit with the filing of the West Virginia Tobacco Products Tax Report) (Rev. June, 2016)

▶ Please print or type <

Account #:	Account Name:		Month:	
A DATE	B INVOICE NUMBER	C COMPANY NAME	D QUANTITY 20's	E QUANTITY 25's
TOTAL CO) COLLIMN E (25'a)		
TOTAL COLUMN D (20's) AND COLUMN E (25's)				
DIVIDING TO	TAL BY 20 OR 25. TRA			