

Date Received

State of New Jersey

DLN

Department of Treasury
Division of Taxation

Federal ID Number

Send This Return to:

Taxpayer Name

Division of Revenue and Enterprise Services
PO Box 250
Trenton, New Jersey 08646-0250

Address

Type of Business: Distributor Wholesale Retail Dealer

Make Payment to: State of New Jersey - TPT-FL

Return and payment are due on or before:

December 20, 2018

Liquid Nicotine (fluid milliliter)

1 Inventory as of the close of business on September 28, 2018

2 Tax Rate

0.10 per fluid milliliter

3 Tax Due on Inventory (Line 1 times Line 2)

Declaration: I declare, under the penalties provided by law, that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct, and complete return. If the return is prepared by a person other than the taxpayer, this declaration is based on all the information relating to the matters required to be reported in the return of which he or she has knowledge.

Taxpayer Signature

Title

Date

Printed Taxpayer Name

Telephone Number

Taxpayer ID#

Paid Preparer Signature

Preparer's Address

Preparer's ID#