



State of Washington  
 Department of Revenue  
 Special Programs Division  
 PO Box 47477  
 Olympia, WA 98504-7477

## Tribal Member Claim for Refund of Washington Cigarette Taxes Paid

*On Cigarettes Purchased as a Consumer within their Indian Country*

Your name \_\_\_\_\_ Phone \_\_\_\_\_

Mailing address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

### To qualify for a refund

In accordance with federal law and rules prescribed by the Department, an enrolled member of a federally recognized Indian tribe may purchase cigarettes from an Indian tribal organization under the jurisdiction of the member's tribe for the member's own use exempt from the applicable taxes imposed by Chapter 82.24 RCW.

Any person may request a refund of the face value of the stamps when the tax is not applicable and the stamps are returned to the Department. Documentation supporting the claim must be provided at the time the claim for refund is made.

To request your refund, you must complete each of the following steps.

### Step 1 Provide the following documentation.

1. Proof of tribal membership. You may use a copy of your tribal membership card, a copy of your certificate of enrollment, or a letter verifying your membership and signed by a tribal official.
2. The cellophane wrapper with the state tax stamp attached for every pack.
3. The original purchase receipt showing the location of the store, the price paid and the date of purchase.

### Step 2 Calculate your refund by filling in the blanks below.

Type of cigarette packs	Number of stamps returned	Tax rate	Tax paid
Stamps from packs of 20	_____ x	\$3.025	= _____
Stamps from packs of 25	_____ x	\$3.78125	= _____
		<b>Total tax paid</b>	_____

### Step 3 Sign this form.

By signing this form, you certify under penalty of perjury under Washington State law that all the information you have provided in and with this form is true.

\_\_\_\_\_  
 Signature of tribal member

\_\_\_\_\_  
 Date signed

### Step 4 Mail the supporting documents along with this form to the address below.

Department of Revenue  
 Special Programs Division  
 PO Box 47477  
 Olympia, WA 98504-7477

If you have any questions, please contact the Cigarette Tax Program at (360) 534-1503.

For tax assistance or to request this document in an alternate format, please call 1-800-647-7706. Teletype (TTY) users may use the Washington Relay Service by calling 711.