Duplicate Credit Memorandum

Step 1: Identify your business	
License number	Account ID
Name	
Address	
City, State, ZIP	
Step 2: Identify the requestor	
Name of person or firm making this request Please print	
Title (if corporation)	
Step 3: Credit memorandum to be transfe	erred (to be completed by Department personnel)
Original credit memo:	Reissued credit memo:
Letter ID	Letter ID
Date on original credit memo/	Date on reissued credit memo/
Original credit memo amount \$	Reissued credit memo amount \$
Step 4: Sign below	
I state that the original credit memorandum shown above and misplaced, lost, or destroyed, thereby preventing the use of all due the Department or to transfer to another account.	·
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Step 5: Mail the form

Mail this completed form to:

ALCOHOL TOBACCO AND FUEL DIVISION ILLINOIS DEPARTMENT OF REVENUE PO BOX 19019
SPRINGFIELD IL 62794-9019

For questions, visit our website at tax.illinois.gov or call us weekdays between 8 a.m. and 4:30 p.m. at 217 782-6045.