



Schedule CH
Other Deductions - Cigarette Tax

Sheet no. _____

Read this information first

- Attach one copy of this schedule to either Forms RC-6, Cigarette Revenue Return, RC-6-A, Out-of-State Cigarette Revenue Return, RC-6-X, Amended Cigarette Revenue Return, or RC-6-A-X, Amended Out-of-State Cigarette Revenue Return, and retain one copy.
Additional instructions are printed on the back of Forms RC-6, RC-6-A, RC-6-X, or RC-6-A-X.

Step 1: Identify your business

Name: _____ Account ID: _____

Address: _____ License no.: ____ - _____
Number and street

City _____ State _____ ZIP _____ Tax period ____ / ____
Month Year

Step 2: Identify your deductions

Table with 4 columns: Invoice date, Invoice no., Reason for deduction, Number of cigarettes. Includes rows for individual entries and summary rows for Page total and Grand total.

