Form 70-2

Wyoming Tax Return - Cigarette
Wholesaler's Monthly Return Supplement

Wyoming Dept of Revenue
122 W 25th St, 2W
Cheyenne, WY 82002-0110

< For Dept Use Only >

Please use black ink to complete form

Ownership RID:

License Number:

Report Period: through

Return Due Date:

Check here if this is an amended return >

Name & Address

Section II - Stamped Cigarette Sales

License Number	DBA Name	Location Address	City	Number 20 count packs	Number 25 count packs
			Total Packs		