Saskatchewan

Saskatchewan Finance

Revenue Division

2350 Albert Street
Regina SK S4P 4A6

On-Reserve Tobacco & Fuel Purchase Report

For the period from ____/____/_____ to ____/____/_____
(day) (month) (year) (day) (month) (year)

1. This report can be mailed to the Department of Finance, Revenue Division or sent by fax at (306) 787-6653,
2. Please list all fuel and tobacco purchases for the reporting period.
3. Refunds will not be processed until the purchase report is submitted whether you are submitting sales transactions in paper form or electronically.
4. Purchase invoices must be kept on file for verification purposes and/or submitted if requested.

Invoice Date	***Invoice Number***	***Supplier Name***	***Supplier Location***	**Tobacco Products**			**Fuel Products**		
				Cigarettes (Cartons)	**Fine Cut Tobacco (Grams)**	**Cigars (# of Cigars)**	**Gas (Litres)**	**Diesel (Litres)**	**Propane (Litres)**
TOTALS									

Store Name _____

Band Name _____

Date _____

Certified Correct:

_____
Signature of Store Manager