Form **332**

Missouri Department of Revenue
**Cash Bond**

Department Use Only (MM/DD/YY)

Missouri Tax I.D. Number (Optional)

Federal Employer I.D. Number

Personal or company checks will not be accepted as payment. Please remit a cashiers check or money order.

**Cash Bond Type**

Select only one:

- ☐ Sales and Use Tax
- ☐ Other Tobacco Products
- ☐ Cigarette Tax
- ☐ Transient Employer Withholding and Unemployment Tax
- ☐ Motor Fuel Tax

Motor Fuel license type (Select One):

- ☐ Supplier or Permissive Supplier
- ☐ Distributor
- ☐ Terminal Operator
- ☐ Transporter

| Amount (U.S. Currency - No personal or company checks) | Date (MM/DD/YYYY) |
|---|---|
| $ | __ __ / __ __ / __ __ __ __ |

At the request of Taxpayers or Business (Owner's name, all Partners, Corporation, or LLC Name)

| Taxpayer or Business Owner's Address | City |
|---|---|
| | |

| County | State | Zip Code | E-mail Address |
|---|---|---|---|
| | | | |

_____(Taxpayer) hereby files with the Missouri Department of Revenue this cash bond and the attached cashier's check or money order in the amount of _____($_____). Taxpayer understands that it is required to comply with all the provisions of any statutorily or constitutionally authorized state or local tax.

If Taxpayer becomes delinquent and owes the Department the above indicated tax, related fees, interest, additions to tax, and penalties due the state of Missouri, the Director of Revenue may forfeit this bond and apply it to any unpaid delinquencies.

Delivery of any demands, notice, or service of process by the Department shall be deemed sufficient and made in the state of Missouri if personally served or if mailed by U.S. mail to the taxpayer or business address as set forth above. This cash bond and any legal action pertaining thereto shall be governed by and construed in accordance with the laws of the state of Missouri. The parties understand and agree that the exclusive jurisdiction for any action concerning this bond shall be the state of Missouri and the only venue shall be in the Circuit Court of Cole County, Missouri.

By signing this cash bond, the undersigned states that he or she has authority to bind the taxpayer or business identified herein.

**Sign**

| Owner, Partner, Corporate Officer or LLC Member | Date (MM/DD/YYYY) |
|---|---|
| | __ __ / __ __ / __ __ __ __ |

Form 332 (Revised 02-2015)

**Mail to:**

Sales and Use or Transient Employer Withholding
Taxation Division
P.O. Box 357
Jefferson City, MO 65105-0357
**Phone:** (573) 751-5860
**Fax:** (573) 522-1722
**E-mail:** businesstaxregister@dor.mo.gov

Motor Fuel Tax
Taxation Division
P.O. Box 300
Jefferson City MO 65105-0300
**Phone:** (573) 751-2611
**Fax:** (573) 522-1720
**E-mail:** excise@dor.mo.gov

Cigarette Tax
Taxation Division
P.O. Box 811
Jefferson City MO 65105-0811
**Phone:** (573) 751-7163
**Fax:** (573) 522-1720
**E-mail:** excise@dor.mo.gov

Other Tobacco Products
Taxation Division
P.O. Box 3320
Jefferson City, MO 65105-3320
**Phone:** (573) 751-5772
**Fax:** (573) 522-1720
**E-mail:** excise@dor.mo.gov

Visit http://dor.mo.gov/business/register/ for additional information. TTY (800) 735-2966

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