



Missouri Department of Revenue
Tobacco Products - Other Than Cigarettes
Military Sales - Schedule D

Company		License Number	
Address	City	State	ZIP Code

Please indicate all sales made to military installations within Missouri.

Your Invoice Date (MM/DD/YYYY)	Your Invoice Number	To Whom Sold	Address	Manufacturer's Invoice Price (Before Discounts and Deals)
__ / __ / ____				\$
__ / __ / ____				
__ / __ / ____				
__ / __ / ____				
__ / __ / ____				
__ / __ / ____				

Enter total here and on Line 8 of Form 4387



\$

Form 4390 (Revised 05-2014)



Missouri Department of Revenue
Tobacco Products - Other Than Cigarettes
Sold to Another Missouri Licensed Wholesaler - Schedule E

Company		License Number	
Address	City	State	ZIP Code

Your Invoice Date (MM/DD/YYYY)	Your Invoice Number	To Whom Sold	Address	Manufacturer's Invoice Price (Before Discounts and Deals)
__ / __ / ____				\$
__ / __ / ____				
__ / __ / ____				
__ / __ / ____				
__ / __ / ____				
__ / __ / ____				

Enter total here and on Line 9 of Form 4387



\$

Form 4390 (Revised 05-2014)