MAIL TO:

Cook County Department of Revenue Cigarette Tax 118 N. Clark Street, Room 1160 Chicago, IL 60602

 Telephone:
 (312) 603-6961

 Fax:
 (312) 603-5717

 Web:
 www.cookcountyil.gov/revenue

COOK COUNTY DEPARTMENT OF REVENUE



CIGARETTE TAX STAMP PURCHASE ACH PAYMENT AUTHORIZATION FORM

In order for Cook County Department of Revenue to initiate an ACH Debit transaction from your account, you are required to complete and remit this authorization form along with the Cook County Department of Revenue Cigarette Tax Stamp Purchase Order Form via email to <u>cigrevenue@cookcountyil.gov</u>. Failure to comply will give the Cook County Department of Revenue cause to reject or delay the processing of your Cigarette Tax Stamp purchase order.

To authorize your bank account for ACH debit, please complete Lines 1 thru 10 below. **If submitting copies of this form, please change the date to reflect the current date of your order.**

1.) Purchaser's Name:			
2.) Registration #:			
3.) Street Address:			
4.) City, State, Zip:			
5.) Contact Person:			
6.) Contact Number:			
7.) E-Mail Address:			
8.) Last 4 Digits of Bank Accou	int Number on f	ïle:	
9.) Total Value of Stamps Purch	nased by Type (enter total dollar amount):	:
a. CookChicago/	Cook	Evanston/Cook	Cicero/Cook
10.) Total Purchase Amour (This total must equal the sum tota		authorized to be debit	ed:
Authorization Box / Authoriza	tion Signature	(box must be checked in	order to process)
Under penalties provided by law, Payment Amount above for the tax			e has the authority to authorize the ACH amp Purchase Order Form.
(Print Name)			(Title)
(Signature)			(Date)

Please check box if your bank account information has changed. You must notify the Cook County Department of Revenue by submitting a new completed Cook County Department of Revenue Cigarette Stamp Debit Form on which the new updated bank account information is noted. Please allow 3-5 business days for information to be updated with our financial institution.