

# TEXAS CIGARETTE AND/OR CIGARS AND TOBACCO PRODUCTS TAXES PERMIT

*This permit is not transferable, and this side must be prominently displayed in your place of business.*

Merchants: DO NOT accept a copy of this permit in place of a resale or exemption certificate. You will be responsible for sales tax on cigarettes and/or tobacco products purchased unless you have a valid resale/exemption certificate on file.

TAXPAYER NAME, BUSINESS LOCATION NAME and PHYSICAL LOCATION / VEHICLE ID

TRUST MART  
3223 N STATE LINE AVE  
TEXARKANA TX 75503-3735

PERMIT DESC: RETAILER

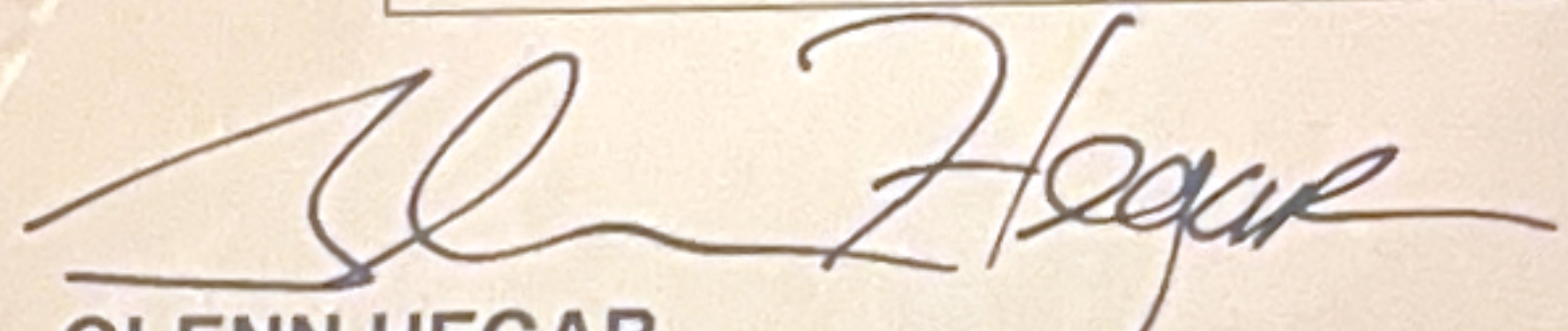
NAICS CODE: 453991  
Tobacco Stores

DESCRIPTION ON NEXT LINE:

This is to certify that the taxpayer named on this permit is authorized to engage in the cigarette, cigar and/or tobacco products business in the classification as shown for the period indicated, subject to the provisions of TEX. TAX CODE ANN. Ch. 154 and 155.

You must obtain a new permit if there is a change of ownership, location, business location name or vehicle I.D.

Permit number	24003267
Expiration date	05/31/2026
Taxpayer number	3-20932-6870-7
Location/vehicle number	00001
Permit begin date	06/01/2024

  
**GLENN HEGAR**  
Comptroller of Public Accounts

**DETACH HERE AND PROMINENTLY DISPLAY YOUR PERMIT ONLY.**

**VERIFY THE INFORMATION PRINTED ON THIS PERMIT**

The information printed on your permit must be accurate and current.

If your permit is correct, DO NOT return this form.

If your permit contains incorrect information, you may use this form to:

- correct your business location name, location address (if not a relocation of your existing business), taxpayer name, vehicle information and/or mailing address;
- provide us with your new Federal Employer Identification Number (FEIN);
- notify us that this location or vehicle is no longer in business and provide the date of your last business transaction. If you are changing the vehicle information, make a copy of the permit, make the corrections on the permit, sign and return to the address below.

To notify us of a change of ownership or business location, to change the description of your business, or to change any other information associated with this permit, call us at 1-800-862-2260 or 512-463-3731.

**TO MAKE CORRECTIONS TO YOUR PERMIT INFORMATION USING THIS FORM:**

- enter the taxpayer name, taxpayer number and location number shown on the permit;
- indicate the required corrections by entering ONLY the information that has changed in the appropriate item(s);
- enter the date of your last business transaction if the specified location on this permit is out of business or has closed, or the vehicle specified on this permit is no longer in service, and return the permit to the Comptroller of Public Accounts;
- sign and date the form;
- mail the form to COMPTROLLER OF PUBLIC ACCOUNTS, 111 E. 17th Street, Austin, TX 78774-0100.

If a new permit is required due to your corrections, you will receive the new permit by mail after your information is processed.

## CIGARETTE AND/OR CIGARS AND TOBACCO PRODUCTS TAXES PERMIT

Taxpayer name shown on the permit <b>SUMIT AND BROTHERS SUPPLIERS INC</b>			
Taxpayer number shown on the permit ■ <b>32093268707</b>		Location number shown on the permit • <b>00001</b>	
Correct business location name •			
Correct business location (Physical address only. No PO Box or directions accepted) •			
City •		State •	ZIP code •
Correct taxpayer name •		Daytime phone (Area code and number)	
Correct mailing address •			
City •	State •	ZIP code •	Federal Employer Identification Number •
If you are <b>no longer in business</b> , enter the date of your last business transaction. _____			
sign here Taxpayer or authorized agent		Date	



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