

# REGISTRATION AND REPORT FOR TAXATION OF UNAUTHORIZED SUBSTANCES



**1. NAME AND MAILING ADDRESS OF DEFENDANT (NOTE: List information for Co-defendants in the space provided)**

LEGAL NAME					SSN				Check the box below if this is an amended report. <input type="checkbox"/>	
STREET ADDRESS										
CITY			STATE	ZIP CODE			COUNTY			
HOME PHONE NUMBER (       )			WORK PHONE NUMBER (       )				DATE OF BIRTH			
DRIVER'S LICENSE NUMBER AND STATE			EMPLOYER NAME AND ADDRESS							

Identification and location of any personal or real property in possession of or belonging to the individual named above, not covered by forfeiture:

**2. INVENTORY OF UNAUTHORIZED SUBSTANCES**

	Quantity
1. Grams, or fraction thereof, of harvested marijuana stems and stalks that have been separated from and are not mixed with any other parts of the marijuana .....	_____
2. Grams, or fraction thereof, of marijuana, other than harvested marijuana stems and stalks that have been separated from and are not mixed with any other parts of the marijuana .....	_____
3. Number of marijuana plants with foliage, whether growing or detached from the soil .....	_____
4. Grams, or fraction thereof, of cocaine .....	_____
5. Grams, or fraction thereof, of any other controlled substance, controlled substance analogue, or low street value drug sold by weight .....	_____
6. Number of sets of 10 dosage units, or fraction thereof, of any low-street-value drug that is <b>not</b> sold by weight .....	_____
7. Number of sets of 10 dosage units, or fraction thereof, of any controlled substance that is <b>not</b> sold by weight .....	_____
8. Gallons, or fraction thereof, of illicit alcoholic beverages sold by the drink .....	_____
9. Gallons, or fraction thereof, of illicit alcoholic beverages <b>not</b> sold by the drink .....	_____

**3. ARREST AND REPORTING AGENCY INFORMATION - Please attach copy of arrest report**

REPORTING AGENCY NAME					DATE OF ARREST		
STREET ADDRESS					REVENUE NUMBER		
CITY			STATE	ZIP CODE		COUNTY	
REPORTING OFFICER'S NAME			OFFICER'S PHONE NUMBER (       )			CASE NUMBER	

**4. AGENCY DISTRIBUTION**

Agency Name	%	For Office Use Jurisdiction Code	Agency Name	%	For Office Use Jurisdiction Code
Tennessee Department of Revenue	25%	N/A	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

# Co-Defendant Information

LEGAL NAME			SSN			
STREET ADDRESS						
CITY			STATE	ZIP CODE		COUNTY
HOME PHONE NUMBER (       )			WORK PHONE NUMBER (       )			DATE OF BIRTH
DRIVER'S LICENSE NUMBER AND STATE		EMPLOYER NAME AND ADDRESS				

Identification and location of any personal or real property in possession of or belonging to the individual named above, not covered by forfeiture:

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LEGAL NAME			SSN			
STREET ADDRESS						
CITY			STATE	ZIP CODE		COUNTY
HOME PHONE NUMBER (       )			WORK PHONE NUMBER (       )			DATE OF BIRTH
DRIVER'S LICENSE NUMBER AND STATE		EMPLOYER NAME AND ADDRESS				

Identification and location of any personal or real property in possession of or belonging to the individual named above, not covered by forfeiture:

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## Instructions and Information

Pursuant to T.C.A 67-4-2801 et seq., a report is required to be filed with the Unauthorized Substances Unit of the Tennessee Department of Revenue by all Local and State Law Enforcement Agencies within 48 hours of making an arrest and /or seizure involving a non-tax paid (unstamped) controlled substance. This standard form should be used by all agencies for reporting purposes.

The report is to be completed and filed only if the arrest and/or seizure involve one or more quantities of a non-tax paid (unstamped) controlled substance:

- More than 42.5 grams of marijuana or marijuana plant with foliation
- Seven (7) or more grams of any other controlled substance sold by weight
- Ten (10) or more dosage units of any other controlled substance not sold by weight
- Any illicit alcoholic beverage

If you have any question on how to complete this form, please call the Unauthorized Substances Unit at 615-741-7071 or contact your local Unauthorized Substances Revenue Enforcement Officer.