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SUBMIT BY JANUARY 20, 2023

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| Part 1: Distribute              | or Identification                 |             |   |  |
|---------------------------------|-----------------------------------|-------------|---|--|
| Company Name                    |                                   |             | FEIN  |  |
| Mailing Address                 |                                   |             |   |  |
| City                            |                                   | State       | Zip Code  |  |
| Phone                           | Fax                               | Web Address |   |  |
| Illinois Business<br>Tax Number | Cigarette License<br>No. Stamping |             | TP License No.  |  |
| Name and title of designat      | ted contact                       |             |   |  |
| Designated Contact<br>Email     |                                   |             | re if Designated Contact has different contact<br>han above and provide that in an attachment |  |
| Name and title of person of     | completing this form              |             |   |  |

Name and title of person completing this form

| Par   | Part 2: Questions relating to your business                     |        |   |        |                 |   |                                   |  |
|---|---|--------|---|--------|-----------------|---|-----------------------------------|--|
| Our s   | ales of tobacco products represent (Check all the               | at app | ly)   |        |                 |   |                                   |  |
|   | Cigarettes stamped by us  |        | RYO/MYO for which<br>WE PAY the Illinois OTP tax        |        |                 |   | "Little Cigars"                   |  |
|   | Unstamped Cigarettes  |        | RYO/MYO for which<br>ANOTHER ENTITY PAYS the Illinois C | )TP ta | ах              |   | Pipe Tobacco, Snuff,<br>or Cigars |  |
|   | Cigarettes which have already been<br>STAMPED BY ANOTHER entity |        | Other:  |        |                 |   |                                   |  |
| Our sales of tobacco products are to the following (Check all that apply) |   |        |   |        |                 |   |                                   |  |
|   | Sales to other distributors                                     |        | Retail sales to customers                               |        | Mail order sale | s |                                   |  |
|   | Sales to retailers  |        | Internet sales  |        | Other           |   |                                   |  |

### Part 3: Purchases of Illinois Cigarette Stamps

The undersigned certifies, under penalty of perjury, as of the date of this certification, that the following list of Illinois cigarette stamp purchases and returns for the above license number is complete and accurate.

| Month | Stamps<br>(20 per pack) | Stamps<br>(25 per pack) | Returns<br>(20 per pack) | Returns<br>(25 per pack) | Month       | Stamps<br>(20 per pack) | Stamps<br>(25 per pack) | Returns<br>(20 per pack) | Returns<br>(25 per pack) |
|-------|-------------------------|-------------------------|--------------------------|--------------------------|-------------|-------------------------|-------------------------|--------------------------|--------------------------|
| JAN   |                         |                         |                          |                          | JUL         |                         |                         |                          |                          |
| FEB   |                         |                         |                          |                          | AUG         |                         |                         |                          |                          |
| MAR   |                         |                         |                          |                          | SEP         |                         |                         |                          |                          |
| APR   |                         |                         |                          |                          | OCT         |                         |                         |                          |                          |
| MAY   |                         |                         |                          |                          | NOV         |                         |                         |                          |                          |
| JUNE  |                         |                         |                          |                          | DEC         |                         |                         |                          |                          |
| 111   | inois Stamp Inve        | entory on hand Ja       | anuary 1, 2022:          | 20                       | -           |                         | 25                      |                          |                          |
| 111   | inois Stamp Inve        | entory on hand Ja       | anuary 1, 2023:          | 20                       |             |                         | 25                      |                          |                          |
| Ir    | nclude in this in       | ventory your ui         | nused stamps p           | urchased unde            | r this lice | nse, plus any u         | nsold, stamped          | product you st           | amped.                   |

If no stamps were purchased in 2022 and no sales were made in 2022, please explain why you have a cigarette distributor license.



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#### Part 4: Illinois Brand Family Sales

#### (Attach additional pages as necessary)

The undersigned distributor certifies, under penalty of perjury, as of the date of this certification, that the following list is a complete list of all of the cigarette brand families (including RYO/MYO tobacco) which were sold during 2022 for purposes of Section 15 of the Escrow Act.

- List only cigarettes which you stamped and RYO/MYO for which you paid the Illinois OTP tax.
- List Brand Families only, NOT brand styles (menthol, regular, full flavor, etc.).
- INCLUDE BOTH PARTICIPATING AND NON-PARTICIPATING BRANDS.

| Brand Family<br>Mark with an asterisk (*)                       |              |   | Check One:                                |                  | <b>/olume</b><br>RYO to sticks.) |
|---|--------------|---|---|------------------|----------------------------------|
| if you sell this brand over<br>the<br>internet or by mail order | Manufacturer | Check One<br>Only                           | Participating<br>or Non-<br>Participating | Cigarette Sticks | RYO Ounces                       |
|   |              | □ Cigarette<br>□ RYO                        | □ PM<br>□ NPM                             |                  |                                  |
|   |              | □ Cigarette<br>□ RYO                        | □ PM<br>□ NPM                             |                  |                                  |
|   |              | <ul><li>☐ Cigarette</li><li>☐ RYO</li></ul> | □ PM<br>□ NPM                             |                  |                                  |
|   |              | □ Cigarette<br>□ RYO                        | □ PM<br>□ NPM                             |                  |                                  |

| Part 5: Vending Machine Sales  | You must check Yes | s or No |
|--|--------------------|---------|
| Does your business sell cigarettes to retailers that sell cigarettes via vending machines? |                    | 🗆 No    |

If Yes, on a separate sheet, provide the name, address and phone number for each customer.

| Part 6: Cigarette Machine Sales Y  | ou mus    | st check | Yes or No |
|--|-----------|----------|-----------|
| Does your business have a Cigarette Machine that your employees and/or customers use to macigarettes onsite from RYO/MYO, pipe or other tobacco? | ake stick | □ Yes    | □ No      |
| Do you have a Cigarette Machine operator license?  |           | □ Yes    | □ No      |

### Part 7: Internet/Mail Order Sales

| Are Illinois cigarette stamps affixed to cigarettes sold via internet or mail order?                      | <u>Internet Sales</u><br>□ Yes<br>□ No                     | <u>Mail Order Sales</u><br>□ Yes<br>□ No                     |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| Are Internet/Mail Order sales made with permission of the manufacturer?                                   | <u>Internet Sales</u><br>□ Yes<br>□ No<br>□ Not Applicable | <u>Mail Order Sales</u><br>□ Yes<br>□ No<br>□ Not Applicable |  |  |  |  |  |
| If yes, list the manufacturers:   |  |  |  |  |  |  |  |
| For Internet Sales, please provide the website address(es) that are used for the sales:                   |  |  |  |  |  |  |  |
| For Mail Order Sales, please identify the publications or other venues where the products are advertised: |  |  |  |  |  |  |  |

You must check Yes or No



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| Part 8: Multi-State Stampers   | You must check Y | es or No |
|--|------------------|----------|
| Are you licensed in states other than Illinois to stamp cigarettes?                    | □ Yes            | □ No     |
| If yes, please list ALL states in which you were licensed in 2022 to stamp cigarettes: |                  |          |
|  |                  |          |
|  |                  |          |
| Are you licensed in states other than Illinois to pay the OTP tax?                     | □ Yes            | □ No     |
| If yes, please list ALL states in which you were licensed in 2022 to pay the OTP tax:  |                  |          |
|  |                  |          |
|  |                  |          |

| Part 9: Industry Shipment Reporting  | You must check Yes               | or No    |
|--|----------------------------------|----------|
| Do you report sales to Management Science Associates, Inc. (MSAI)?   |                                  | ∃ No     |
| If yes, please list all years for which sales were reported to MSAI.   |                                  |          |
| Do you report sales to any other entity?   | □ Yes                            | ∃ No     |
| If yes, list all manufacturers (including any contracts, agreements or other arrangement to re<br>agreements) or other entities to whom you provide information regarding sales in Illinois: | port sales include direct buyer/ | customer |

### Part 10: Distributor Certification

Under penalties of perjury, I state that, to the best of my knowledge, all of the information contained in this Affidavit and any attached documents are true and accurate. *This document must be signed and dated by an authorized notary public.* 

| Distributor's Designee (Print Name)            | Title                       |                    |
|--|-----------------------------|--------------------|
| Signature of Distributor's Designee            | Date                        |                    |
| to before me this date:                        | Signature of Notary Public  |                    |
|  | County                      | Commission Expires |
| Submit the completed Affidevit via Mail or E M |                             |                    |
| Submit the completed Affidavit via Mail or E-N | ail by January 20, 2023 to: |                    |



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#### Instructions:

- All cigarette licensees must complete this Affidavit, regardless of whether they sold tobacco products during 2021.
- Do not include product which was stamped by another licensee.
- Where one company holds a number of licenses, each license holder must complete a separate Affidavit. The license holder that stamps or pays the Illinois OTP tax must complete Parts 3-5.
- Respond to each item. If a question does not apply, please explain.
- For Part 4, include sales information for participating manufacturers and non-participating manufacturers.
- Distributors are responsible for their own calculations. If computer reports are provided in response to Parts 4 and 5, they must include the total for 2021 by brand family.
- Attach additional pages as needed and where explanations are required.
- Cigarette Making Machine as used in Part 6 refers to the machines that are made available for use in a commercial setting, including retail locations and locations where the machines are made available to members of a "social club" or "non-profit." It does NOT include cigarette rolling machines intended and designed for use by individual consumers who do not intend to offer the resulting product for resale. Hot Rod Filling Station is an example of Cigarette Making Machine.