STATE OF DELAWARE **DIVISION OF REVENUE**

SCHEDULE NPM CIGARETTE SALES OF

MONTH OF	, 20	

820 NORTH ERENCH ST

CONTACT PERSON:

820 NORTH FRENCH ST. P.O. BOX 8911 WILMINGTON, DE 19899-8911	NON-PARTICIPATING MANUFAC	CTURER BRANDS	
BUSINESS NAME & ADDRESS:		EMPLOYER IDENTIFICATION NUMBER:	

					·			
BRAND NAME	NUMBER OF PACKS		OUNCES OF RYO	NON-PARTICIPATING MANUFACTURER NAME & ADDRESS	NAME & ADDRESS PERSON(S) PROW WHOM EACH MANUFACTURED READER		NON-PARTICIPATING PERSON(S) FROM WHOM EACH NAME & ADDRESS OF THE	NAME & ADDRESS OF THE FIRST IMPORTER OF FOREIGN MANUFACTURED BRANDS
	20'S	25'S			BRAND WAS PURCHASED			
					-	· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·							
		·		, ,				
						w.,.		
	_			•				

TELEPHONE NUMBER: _

I certify that the above information is true and correct.

Signature

Date

STATE OF DELAWARE DIVISION OF REVENUE 820 NORTH FRENCH ST. P.O. BOX 8911

SCHEDULE NPM CIGARETTE SALES OF NON-PARTICIPATING MANUFACTURER BRANDS

MONTH OF

WILMINGTON, DE 19899-8911

BUSINESS NA	BUSINESS NAME & ADDRESS:			EMPLOYER IDENTI	EMPLOYER IDENTIFICATION NUMBER:	
CONTACT PERSON:	RSON:			TELEPHONE NUMBER:	E NUMBER:	
BRAND NAME	NUMBER OF CIGARETTE PACKS SOLD	CIGARETTE SOLD	OUNCES OF	NON-PARTICIPATING	NAME & ADDRESS OF THE PERSON(S) FROM WHOM EACH	NAME & ADDRESS OF THE FIRST IMPORTER OF FOREK
	20'S	25'S			BRAND WAS PURCHASED	חורויסן הסייסוובה הייחיונים
					-	

I certify that the above information is true and correct.

Signature

Date