

DEPARTMENT OF THE TREASURY
ALCOHOL AND TOBACCO TAX AND TRADE BUREAU (TTB)

MONTHLY REPORT - TOBACCO PRODUCTS OR PROCESSED TOBACCO IMPORTER

INSTRUCTIONS: Please type or print. Prepare in duplicate, retain the copy, and submit the original to the TTB National Revenue Center, 550 Main St, Ste 8002, Cincinnati, Ohio 45202-5215, not later than the 15th day of the month following the end of the month for which report is made. Combine data for all locations covered by a single permit. Report quantities of chewing tobacco, snuff, pipe tobacco, roll-your-own tobacco, and processed tobacco in pounds and fractions of a pound rounded to two decimal places.

| | | | | | | | | | | | | | | | | | | |
|---------------------|------------------|--|---|--|--|--|--|--|--|--|---|--|--|--|--|--|--|--|
| 1. NAME OF IMPORTER | | | 2. PRINCIPAL BUSINESS ADDRESS (Number, Street, City, State, and ZIP Code) | | | | | | | | | | | | | | | |
| 3. MONTH AND YEAR | 4. PERMIT NUMBER | 5. EMPLOYER IDENTIFICATION NUMBER (EIN) | | | | | | | | | | | | | | | | |
| | | <table style="margin: auto; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="width: 10px; text-align: center;">-</td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table> | | | | | | | | | - | | | | | | | |
| | | - | | | | | | | | | | | | | | | | |

| ARTICLE | SMALL CIGARETTES (Number) (a) | LARGE CIGARETTES (Number) (b) | SMALL CIGARS (Number) (c) | LARGE CIGARS (Number) (d) | SNUFF (Pounds) (e) | CHEWING TOBACCO (Pounds) (f) | PIPE TOBACCO (Pounds) (g) | ROLL-YOUR-OWN TOBACCO (Pounds) (h) | PROCESSED TOBACCO (Pounds) (i) |
|--|-------------------------------------|-------------------------------------|---------------------------------|---------------------------------|--------------------------|------------------------------------|---------------------------------|---|---|
| 6. On Hand, Beginning of Month | | | | | | | | | |
| 7. Imported and Released from Customs Custody into the United States | | | | | | | | | |
| 8. Received from Other Sources | | | | | | | | | |
| 9. Overage Disclosed by Inventory | | | | | | | | | |
| 10. Returned from Domestic Customers | | | | | | | | | |
| 11. TOTAL | | | | | | | | | |

| ARTICLE | SMALL CIGARETTES (Number) (a) | LARGE CIGARETTES (Number) (b) | SMALL CIGARS (Number) (c) | LARGE CIGARS (Number) (d) | SNUFF (Pounds) (e) | CHEWING TOBACCO (Pounds) (f) | PIPE TOBACCO (Pounds) (g) | ROLL-YOUR-OWN TOBACCO (Pounds) (h) | PROCESSED TOBACCO (Pounds) (i) |
|---------------------------------------|-------------------------------------|-------------------------------------|---------------------------------|---------------------------------|--------------------------|------------------------------------|---------------------------------|---|---|
| 12. Removed for Export Purposes | | | | | | | | | |
| 13. Transferred to Domestic Customers | | | | | | | | | |
| 14. Removed to a Foreign Trade Zone | | | | | | | | | |
| 15. Returned to Customs Custody | | | | | | | | | |
| 16. Lost | | | | | | | | | |
| 17. Destroyed | | | | | | | | | |
| 18. Shortages Disclosed By Inventory | | | | | | | | | |
| 19. On Hand, End of Month | | | | | | | | | |
| 20. TOTAL | | | | | | | | | |

| | | | | | | | | | |
|---|--|----------|--|--------------------|--|-------------------------------------|--|-------------------------|--|
| Under the penalties of perjury, I declare that I have examined this report and, to the best of my knowledge and belief, it is true, correct, and complete. | | | | | | | | FOR TTB USE ONLY | |
| 21. SIGNATURE | | 22. DATE | | 23. E-MAIL ADDRESS | | | | AUDITED BY | |
| 24. TITLE OR STATUS (<i>State whether individual owner, partner, member of a limited liability company, or if officer of corporation, give title</i>) | | | | | | 25. TELEPHONE NUMBER () — | | DATED AUDITED | |

PAPERWORK REDUCTION ACT NOTICE

This request is in accordance with the Paperwork Reduction Act of 1995. The purpose of this information collection is to establish product accountability and to compile data for statistical purposes. The information is mandatory (26 U.S.C. 5722).

The estimated average burden associated with this collection of information is 56 minutes per respondent or recordkeeper, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be addressed to the Reports Management Officer, Regulations and Rulings Division, Alcohol and Tobacco Tax and Trade Bureau, Washington, DC 20220.

An agency may not conduct or sponsor, and an individual is not required to respond to, a collection of information unless it displays a current, valid OMB control number.

