



**STATE OF SOUTH CAROLINA**  
**NON-PARTICIPATING MANUFACTURER'S QUARTERLY SALES INFORMATION - 2014**  
 [Pursuant to S.C. Code Ann. §11-48-50]

**Manufacturer Identification**

Company Name:		Date:	
Address:			
City:	State:	Zip:	Country:
Telephone Number:	Fax Number:	E-Mail Address:	
Name/Title of Person Completing Form:			

**MANUFACTURER'S RECORDS**

(Attach Addendum Pages As necessary)  
 Year of Liability 2014  
 Quarter Reported (check one):

- 1<sup>st</sup> Qtr. Jan.-Mar. (Due: Apr. 20)
- 2<sup>nd</sup> Qtr. Apr.-Jun. (Due: Jul. 20)
- 3<sup>rd</sup> Qtr. Jul.-Sep. (Due: Oct. 20)
- 4<sup>th</sup> Qtr. Oct.-Dec. (Due: Jan. 20)
- Other: \_\_\_\_\_

**Instructions for Manufacturer:** List each distributor that is responsible for South Carolina tax on your cigarette and RYO brand(s). For each distributor, provide the name, address, contact person and phone numbers. For each distributor, provide the sales volume for South Carolina.

**Product Sold Into South Carolina in 2014**

<b>Distributor Name:</b>	<b>Contact Person's Title/Name:</b>	<b>Distributor Address:</b>	<b>Phone Number:</b>
<b>Brand Family:</b>	<b>Check One:</b> <input type="checkbox"/> RYO <input type="checkbox"/> Cigarette	<b>Sales Volume per Manufacturer:</b> (Sticks Sold or RYO Ounces)	<b>Sales Volume per Distributor reports to Dept. of Revenue (AG use only)</b>

<b>Distributor Name:</b>	<b>Contact Person's Title/Name:</b>	<b>Distributor Address:</b>	<b>Phone Number:</b>
<b>Brand Family:</b>	<b>Check One:</b> <input type="checkbox"/> RYO <input type="checkbox"/> Cigarette	<b>Sales Volume per Manufacturer:</b> (Sticks Sold or RYO Ounces)	<b>Sales Volume per Distributor reports to Dept. of Revenue (AG use only)</b>

<b>Distributor Name:</b>	<b>Contact Person's Title/Name:</b>	<b>Distributor Address:</b>	<b>Phone Number:</b>
<b>Brand Family:</b>	<b>Check One:</b> <input type="checkbox"/> RYO <input type="checkbox"/> Cigarette	<b>Sales Volume per Manufacturer:</b> (Sticks Sold or RYO Ounces)	Sales Volume per Distributor reports to Dept. of Revenue (AG use only)

<b>Distributor Name:</b>	<b>Contact Person's Title/Name:</b>	<b>Distributor Address:</b>	<b>Phone Number:</b>
<b>Brand Family:</b>	<b>Check One:</b> <input type="checkbox"/> RYO <input type="checkbox"/> Cigarette	<b>Sales Volume per Manufacturer:</b> (Sticks Sold or RYO Ounces)	Sales Volume per Distributor reports to Dept. of Revenue (AG use only)

<b>Distributor Name:</b>	<b>Contact Person's Title/Name:</b>	<b>Distributor Address:</b>	<b>Phone Number:</b>
<b>Brand Family:</b>	<b>Check One:</b> <input type="checkbox"/> RYO <input type="checkbox"/> Cigarette	<b>Sales Volume per Manufacturer:</b> (Sticks Sold or RYO Ounces)	Sales Volume per Distributor reports to Dept. of Revenue (AG use only)

<b>Distributor Name:</b>	<b>Contact Person's Title/Name:</b>	<b>Distributor Address:</b>	<b>Phone Number:</b>
<b>Brand Family:</b>	<b>Check One:</b> <input type="checkbox"/> RYO <input type="checkbox"/> Cigarette	<b>Sales Volume per Manufacturer:</b> (Sticks Sold or RYO Ounces)	Sales Volume per Distributor reports to Dept. of Revenue (AG use only)

<b>Distributor Name:</b>	<b>Contact Person's Title/Name:</b>	<b>Distributor Address:</b>	<b>Phone Number:</b>
<b>Brand Family:</b>	<b>Check One:</b> <input type="checkbox"/> RYO <input type="checkbox"/> Cigarette	<b>Sales Volume per Manufacturer:</b> (Sticks Sold or RYO Ounces)	Sales Volume per Distributor reports to Dept. of Revenue (AG use only)

<b>Distributor Name:</b>	<b>Contact Person's Title/Name:</b>	<b>Distributor Address:</b>	<b>Phone Number:</b>
<b>Brand Family:</b>	<b>Check One:</b> <input type="checkbox"/> RYO <input type="checkbox"/> Cigarette	<b>Sales Volume per Manufacturer:</b> (Sticks Sold or RYO Ounces)	Sales Volume per Distributor reports to Dept. of Revenue (AG use only)

<b>For Attorney General Use Only:</b>  <b>Total Cigarette Sticks:</b> _____  <b>Total RYO Ounces:</b> _____
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## Product Sold Outside of South Carolina

<b>Distributor Name:</b>	<b>Contact Person's Title/Name:</b>	<b>Distributor Address:</b>	<b>Phone Number:</b>
<b>Brand Family:</b>	<b>Check One:</b> <input type="checkbox"/> RYO <input type="checkbox"/> Cigarette	<b>Sales Volume per Manufacturer:</b> (Sticks Sold or RYO Ounces)	<b>Sales Volume per Distributor reports to Dept. of Revenue (AG use only)</b>

<b>Distributor Name:</b>	<b>Contact Person's Title/Name:</b>	<b>Distributor Address:</b>	<b>Phone Number:</b>
<b>Brand Family:</b>	<b>Check One:</b> <input type="checkbox"/> RYO <input type="checkbox"/> Cigarette	<b>Sales Volume per Manufacturer:</b> (Sticks Sold or RYO Ounces)	<b>Sales Volume per Distributor reports to Dept. of Revenue (AG use only)</b>

<b>Distributor Name:</b>	<b>Contact Person's Title/Name:</b>	<b>Distributor Address:</b>	<b>Phone Number:</b>
<b>Brand Family:</b>	<b>Check One:</b> <input type="checkbox"/> RYO <input type="checkbox"/> Cigarette	<b>Sales Volume per Manufacturer:</b> (Sticks Sold or RYO Ounces)	<b>Sales Volume per Distributor reports to Dept. of Revenue (AG use only)</b>

<b>Distributor Name:</b>	<b>Contact Person's Title/Name:</b>	<b>Distributor Address:</b>	<b>Phone Number:</b>
<b>Brand Family:</b>	<b>Check One:</b> <input type="checkbox"/> RYO <input type="checkbox"/> Cigarette	<b>Sales Volume per Manufacturer:</b> (Sticks Sold or RYO Ounces)	<b>Sales Volume per Distributor reports to Dept. of Revenue (AG use only)</b>

<b>Distributor Name:</b>	<b>Contact Person's Title/Name:</b>	<b>Distributor Address:</b>	<b>Phone Number:</b>
<b>Brand Family:</b>	<b>Check One:</b> <input type="checkbox"/> RYO <input type="checkbox"/> Cigarette	<b>Sales Volume per Manufacturer:</b> (Sticks Sold or RYO Ounces)	<b>Sales Volume per Distributor reports to Dept. of Revenue (AG use only)</b>

<b>For Attorney General Use Only:</b>
Total Cigarette Sticks: _____
Total RYO Ounces: _____

**Certification of Escrow Account and Agreement**

**Name of Financial Institution (Escrow Agent):**

**Mailing Address:**

**City:**

**State:**

**Zip Code:**

**Phone:**

**Fax:**

**Contact Person:**

**Contact Email:**

**Escrow Account Number:**

**Total amount held in account for state of South Carolina:**

**South Carolina Sub-Account Number:**