

Participating or Non-Participating Manufacturer Certification – Brand Disclosure



**Schedule C** IMPORTED Little Cigar Brands

Foreign Manufacturer Name		Certification for Sales Year
Authorized Importer <b>WI Dept of Revenue</b>	Authorized Importer's Federal Permit No.	Authorized Importer's WDOR Permit No.

Acrobat does not allow you to save your completed form. Read more at [www.dor.state.wi.us/html/taxfill.html](http://www.dor.state.wi.us/html/taxfill.html). To ensure your personal information is kept confidential ... Read

**BRAND INFORMATION**

**IMPORTANT** All brands, regardless of quantity, must be listed by May 23, 2000, MUST be listed. Failure to disclose all brands on this application is cause for delisting.

**IMPORTED BRANDS**

▼ Mark this box

<input checked="" type="checkbox"/>	1. Brand Name	2. Brand Style	3. MSA Status (check one) <input type="checkbox"/> PM <input type="checkbox"/> NPM	4. Brand Reference No. <b>C -</b> _____
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5. Price per Carton to Distributor for Sale & Distribution in Wisconsin:  
 Pkg. (i.e. 8/25, 10/20, 10/25, etc.) >> \_\_\_\_\_ \$ (\*) Attach a current price list as Exhibit \_\_\_\_\_

6. Trademark Owner(\*): a. Legal Name >> \_\_\_\_\_ b. Doing Business As (DBA) Name \_\_\_\_\_

6c. Address: Street Address \_\_\_\_\_ City \_\_\_\_\_ State / Province \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

7. Physical Location(s) where these Little Cigars are fabricated >> Street Address \_\_\_\_\_ City \_\_\_\_\_ State / Province \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

7a. Name of owner of this plant / facility (print or type) \_\_\_\_\_ 7b. Date First Manufactured \_\_\_\_\_ 7c. Date Last Manufactured \_\_\_\_\_ Reason:  Discontinued  Other (explain) \_\_\_\_\_

7d. Is this the sole facility where this brand / brand style is fabricated?  
 Yes  No If No, please explain and complete additional Schedule C for other location(s) and attach.

8. Exporter: a. Legal Name >> \_\_\_\_\_ b. Doing Business As (DBA) Name \_\_\_\_\_

8c. Address: Street Address \_\_\_\_\_ City \_\_\_\_\_ State / Province \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

9. Date First Exported to U.S.	10. Date Last Exported to U.S. Reason: <input type="checkbox"/> Discontinued <input type="checkbox"/> Other (explain)	11. Date First Imported into U.S.	12. Date Last Imported into U.S. Reason: <input type="checkbox"/> Discontinued <input type="checkbox"/> Other (explain)
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(\*) Requires attached supporting documents.