

Department of Revenue Services  
 State of Connecticut  
 Excise Taxes Unit  
 25 Sigourney Street  
 Hartford CT 06106  
 (Rev. 04/05)

# Schedule C

## Tobacco Products Tax

### Record of tobacco products (excluding snuff tobacco products) exported out of Connecticut

Enter the total of Schedule C on Line 4 of **Form OP-300**, *Tobacco Products Tax Return*. Attach Schedule C to the return. **Prepare a separate Schedule C for each state of destination.** *Wholesale Sales Price* means: In the case of a distributor that is the manufacturer of the tobacco products, the price set for these products or, if no price has been set, the wholesale value of these products; in the case of a distributor that is not the manufacturer of the tobacco products, the price at which the distributor purchased the products. Attach additional sheets if needed.

Name \_\_\_\_\_ Period Ending \_\_\_\_\_ State of Destination \_\_\_\_\_

CT Tax Registration Number \_\_\_\_\_

Invoice Date	Invoice Number	Customer Name	Customer Address	City	State	ZIP Code	Wholesale Sales Price	
Column 1	Column 2	Column 3	Column 4	Column 5	Column 6	Column 7	Column 8	
Enter this amount on Line 4 of <b>Form OP-300</b>							<b>Total</b>	