Department of Revenue Services PO Box 5018 Hartford CT 06102-5018

## Schedule C

**Tobacco Products Tax** 

## Record of tobacco products, excluding snuff tobacco products, exported out of Connecticut

(Rev. 05/09)

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	Invoice		Customer Address	0.1	<b>0</b> 1 1		
Date	Number	Customer Name	Customer Address Column 4	City	State	ZIP Code	Wholesale Sales Price
Column 1	Column 2	Column 3		Column 5	Column 6	Column 7	Column 8
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Enter this amount on Line 4 of Form OP-300. Total							