

Schedule A-4

Tobacco Products Tax - Nonresident Distributor

Record of snuff tobacco products purchased, imported, received, or acquired in Connecticut

Include the total of Schedule A-4 on Form OP-300, *Tobacco Products Tax Return*, Line 9. Attach Schedule A-4 to the return.

Attach additional sheets if needed.

Name _____ Period ending _____ CT Tax Registration Number _____

Address _____

| Column 1 Invoice Number | Column 2 Date | Column 3 Imported To | Column 4 Wholesale Sales Price | Column 5 Brand Name | Column 6 Quantity | Column 7 Weight Each <i>(in ounces)</i> | Column 8 Total Weight <i>(Col. 6 x 7)</i> | |
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| Include this amount on Form OP-300, Line 9. | | | | | | | Total | |