



# State of Illinois Distributor Affidavit for 2023 Sales of Cigarettes or OTP

SUBMIT BY  
JANUARY 20, 2024

See Page 4 Instructions before completing.

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## Part 1: Distributor Identification

Company Name _____		FEIN _____
Mailing Address _____		
City _____	State _____	Zip Code _____
Phone _____	Fax _____	Web Address _____
Illinois Business Tax Number _____	Cigarette License No. Stamping _____	TP License No. _____
Name and title of designated contact _____		
Designated Contact Email _____	<input type="checkbox"/> Check here if Designated Contact has different contact information than above and provide that in an attachment.	
Name and title of person completing this form _____		

## Part 2: Questions relating to your business

Our sales of tobacco products represent (Check all that apply)

<input type="checkbox"/> Cigarettes stamped by us	<input type="checkbox"/> RYO/MYO for which WE PAY the Illinois OTP tax	<input type="checkbox"/> "Little Cigars"
<input type="checkbox"/> Unstamped Cigarettes	<input type="checkbox"/> RYO/MYO for which ANOTHER ENTITY PAYS the Illinois OTP tax	<input type="checkbox"/> Pipe Tobacco, Snuff, or Cigars
<input type="checkbox"/> Cigarettes which have already been STAMPED BY ANOTHER entity	<input type="checkbox"/> Other: _____	

Our sales of tobacco products are to the following (Check all that apply)

<input type="checkbox"/> Sales to other distributors	<input type="checkbox"/> Retail sales to customers	<input type="checkbox"/> Does your business have a Cigarette Machine that makes stick cigarettes onsite from RYO/MYO, pipe or other tobacco?
<input type="checkbox"/> Sales to retailers	<input type="checkbox"/> Internet sales	<input type="checkbox"/> Other
<input type="checkbox"/> Sales to retailers with cigarette vending machines	<input type="checkbox"/> Mail order sales	

## Part 3: Purchases of Illinois Cigarette Stamps

The undersigned certifies, under penalty of perjury, as of the date of this certification, that the following list of Illinois cigarette stamp purchases and returns for the above license number is complete and accurate.

Month	Stamps (20 per pack)	Stamps (25 per pack)	Returns (20 per pack)	Returns (25 per pack)	Month	Stamps (20 per pack)	Stamps (25 per pack)	Returns (20 per pack)	Returns (25 per pack)
JAN					JUL				
FEB					AUG				
MAR					SEP				
APR					OCT				
MAY					NOV				
JUNE					DEC				

Illinois Stamp Inventory on hand January 1, 2023:      20      \_\_\_\_\_      25      \_\_\_\_\_

Illinois Stamp Inventory on hand January 1, 2024:      20      \_\_\_\_\_      25      \_\_\_\_\_

**Include in this inventory your unused stamps purchased under this license, plus any unsold, stamped product you stamped.**

**If no stamps were purchased in 2023 and no sales were made in 2023, please explain why you have a cigarette distributor license.**



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## Part 4: Illinois Brand Family Sales

(Attach additional pages as necessary)

The undersigned distributor certifies, under penalty of perjury, as of the date of this certification, that the following list is a complete list of all of the cigarette brand families (including RYO/MYO tobacco) which were sold during 2023 for purposes of Section 15 of the Escrow Act.

- List only cigarettes which you stamped and RYO/MYO for which you paid the Illinois OTP tax.
- List Brand Families only, NOT brand styles (menthol, regular, full flavor, etc.).
- **INCLUDE BOTH PARTICIPATING AND NON-PARTICIPATING BRANDS.**

Brand Family Mark with an asterisk (*) if you sell this brand over the internet or by mail order	Manufacturer	Check One Only	Check One: Participating or Non- Participating	Sales Volume <i>(Do not convert RYO to sticks.)</i>	
				Cigarette Sticks	RYO Ounces
		<input type="checkbox"/> Cigarette <input type="checkbox"/> RYO	<input type="checkbox"/> PM <input type="checkbox"/> NPM		
		<input type="checkbox"/> Cigarette <input type="checkbox"/> RYO	<input type="checkbox"/> PM <input type="checkbox"/> NPM		
		<input type="checkbox"/> Cigarette <input type="checkbox"/> RYO	<input type="checkbox"/> PM <input type="checkbox"/> NPM		
		<input type="checkbox"/> Cigarette <input type="checkbox"/> RYO	<input type="checkbox"/> PM <input type="checkbox"/> NPM		

## Part 5: Internet/Mail Order Sales

**You must check Yes or No**

Are Illinois cigarette stamps affixed to cigarettes sold via internet or mail order?	<u>Internet Sales</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>Mail Order Sales</u> <input type="checkbox"/> Yes <input type="checkbox"/> No
Are Internet/Mail Order sales made with permission of the manufacturer?	<u>Internet Sales</u> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	<u>Mail Order Sales</u> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable
If yes, list the manufacturers: _____		
For <b>Internet Sales</b> , please provide the website address(es) that are used for the sales:		
For <b>Mail Order Sales</b> , please identify the publications or other venues where the products are advertised:		



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## Part 6: Multi-State Stampers

You must check Yes or No

Are you licensed in states other than Illinois to stamp cigarettes?

Yes

No

If yes, please list ALL states in which you were licensed in 2023 to stamp cigarettes:

Are you licensed in states other than Illinois to pay the OTP tax?

Yes

No

If yes, please list ALL states in which you were licensed in 2023 to pay the OTP tax:

## Part 7: Industry Shipment Reporting

You must check Yes or No

Do you report sales to Management Science Associates, Inc. (MSAI)?

Yes

No

If yes, please list all years for which sales were reported to MSAI. \_\_\_\_\_

Do you report sales to any other entity?

Yes

No

If yes, list all manufacturers (including any contracts, agreements or other arrangement to report sales include direct buyer/customer agreements) or other entities to whom you provide information regarding sales in Illinois:

## Part 8: Distributor Certification

Under penalties of perjury, I state that, to the best of my knowledge, all of the information contained in this Affidavit and any attached documents are true and accurate. ***This document must be signed and dated by an authorized notary public.***

\_\_\_\_\_  
Distributor's Designee (Print Name)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature of Distributor's Designee

\_\_\_\_\_  
Date

Subscribed and sworn  
to before me this date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
County

\_\_\_\_\_  
Commission Expires

**Submit the completed Affidavit via Mail or E-Mail by January 20, 2024 to:**

**Illinois Attorney General  
Tobacco Enforcement Bureau  
500 South Second Street  
Springfield IL 62701  
Tobacco.tobacco@ilag.gov**

**For Additional Forms and Information**  
Phone (217) 785-8541  
Fax (217) 524-4701  
[www.IllinoisAttorneyGeneral.gov](http://www.IllinoisAttorneyGeneral.gov) (Click on Tobacco)



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## Instructions:

- All cigarette licensees must complete this Affidavit, regardless of whether they sold tobacco products during 2023.
- Do not include product which was stamped by another licensee.
- Where one company holds a number of licenses, each license holder must complete a separate Affidavit. The license holder that stamps or pays the Illinois OTP tax must complete Parts 3-4.
- Respond to each item. If a question does not apply, please explain.
- For Part 4, include sales information for participating manufacturers and non-participating manufacturers.
- Distributors are responsible for their own calculations. If computer reports are provided in response to Parts 4, they must include the total for 2023 by brand family.
- Attach additional pages as needed and where explanations are required.
- Cigarette Making Machine as used in Part 2 refers to the machines that are made available for use in a commercial setting, including retail locations and locations where the machines are made available to members of a "social club" or "non-profit." It does NOT include cigarette rolling machines intended and designed for use by individual consumers who do not intend to offer the resulting product for resale. Hot Rod Filling Station is an example of Cigarette Making Machine.