OKLAHOMA ATTORNEY GENERAL - TOBACCO ENFORCEMENT



NON-PARTICIPATING TOBACCO MANUFACTURER'S CERTIFICATE OF COMPLIANCE WITH YEARLY ESCROW PAYMENT REQUIREMENT ON SALES IN 2022

Line 1: Tobacco Manufacturer's Identification

Name:	
Address:	
Phone:	Facsimile:
Email:	
Brand Name(s) Manufactured:	
Location of Manufacturing Facility(s):	

Line 2: Sales in 2022

Quarter No.:

Line 3: Units Sold in Oklahoma in 2022

Number of individual cigarettes and "roll-your-own" tobacco sold in Oklahoma by the Manufacturer - whether sold directly or through a distributor, retailer or similar intermediary or intermediaries:

Cigarettes Sold in Oklahoma in 2022:	
RYO (0.09 ounces of RYO tobacco is counted as 1 unit):	

Line 4: Base Escrow Amount

The Base Escrow Amount is determined by multiplying the number of units sold, from Line 3, by **\$0.0188482**.

Base Escrow Amount:

Line 5: Inflation Adjustment (Estimated)

The Inflation Adjustment is determined by multiplying the Base Escrow Amount, from Line 4, by **122.89609**% (or, **\$0.0231637** per unit).

Inflation Adjustment:

Line 6: Total Escrow Payment Due

The Total Escrow Payment Due is determined by adding the Base Escrow Amount, from Line 4, to the Inflation Adjustment, from Line 5 (or, **\$0.0420119** per unit sold).

Total Escrow Payment Due:

Line 7: Amount Deposited in Escrow Account

Total Amount Deposited in the Escrow Account for the State of Oklahoma based on sales in Oklahoma in 2022, (should be an amount not less than the amount of the Total Escrow Payment Due, from Line 6).

Amount Deposited in Escrow Account:	
Line 8: Financial Institution	
Name of Financial Institution:	
Address:	
Escrow Account No.:	
Phone No.:	Email:

Please mail escrow deposit confirmation documents to:

Office of the Oklahoma Attorney General Attention: Tobacco Enforcement 313 N.E. 21st Street Oklahoma City, Oklahoma 73105

Line 9: Signature

This Certificate of Compliance must also be signed and dated by an authorized Notary Public.

Under penalty of perjury, I state that, to the best of my knowledge, all of the information contained in this Yearly Certificate of Compliance is true and correct, and that I am an officer authorized to legally bind the above-named company either under the laws of the State of Oklahoma or of the jurisdiction where the manufacturer resides or is organized.

Name of Authorized Agent:		Title:	
Signature of Authorized Agent:	 I	Date:	
STATE OF COUNTY OF))		
COUNTRYOF	/)		
Subscribed and sworn to before me		, 20, _, personally known to	
on the basis of satisfactory evidence instrument and acknowledge to me capacity(ies), and that by his/her/th upon behalf of which the person(s) a	ce) to be the persor e that he/she/they ex heir signature(s) on	n(s) whose name(s) is/a kecuted the same in hi the instrument the pe	are subscribed to the s/her/their authorized

WITNESS my hand and official seal.

Notary Public

My Commission Expires

This notarized Certificate of Compliance, together with Proof of Deposit, must be received at the address below by April 15, 2023. OTC Rule 710:70-9-4.

Office of the Oklahoma Attorney General Attention: Tobacco Enforcement 313 N.E. 21st Street Oklahoma City, Oklahoma 73105

You must sign and mail the original form to the address above.