



Missouri Department of Revenue
Missouri Tobacco Directory
Participating Manufacturer Brands Certification

Company Name

As of the date of this certification, the manufacturer identified in the Manufacturer Identification section of [Form 5305](#) is a Participating Manufacturer (PM) and has generally performed its financial obligations under the Master Settlement Agreement (MSA). The PM certifies that the brand families listed in this certification are a complete list of the brand families which are deemed to be its cigarettes (including RYO product) for purposes of calculating payments under the MSA in the volumes and shares determined pursuant to the MSA. Nothing in this certification shall limit or otherwise affect the State's right to maintain that a brand family constitutes cigarettes or RYO tobacco of a different tobacco product manufacturer for the purposes of calculating payment under the MSA.

Asterisk (*) denotes brands that will not be sold in Missouri during the current year.

Brand Family Certification

Brand Family	Brand Style	Size	Flavor	Container	Select One	Packaging Submitted (Yes or No)	Fire Safe (Yes or No)	UPC Code (Pack or Box)
					<input type="checkbox"/> Cigarette <input type="checkbox"/> RYO			
					<input type="checkbox"/> Cigarette <input type="checkbox"/> RYO			
					<input type="checkbox"/> Cigarette <input type="checkbox"/> RYO			
					<input type="checkbox"/> Cigarette <input type="checkbox"/> RYO			
					<input type="checkbox"/> Cigarette <input type="checkbox"/> RYO			
					<input type="checkbox"/> Cigarette <input type="checkbox"/> RYO			
					<input type="checkbox"/> Cigarette <input type="checkbox"/> RYO			
					<input type="checkbox"/> Cigarette <input type="checkbox"/> RYO			
					<input type="checkbox"/> Cigarette <input type="checkbox"/> RYO			
					<input type="checkbox"/> Cigarette <input type="checkbox"/> RYO			

Attach To Missouri Tobacco Directory - Participating Manufacturer Certification (Form 5305)

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Signature

Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct.

Signature of Authorized Person For Participating Manufacturer	Printed Name	Title	Date (MM/DD/YYYY) ____/____/____
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Mail to: Taxation Division and Missouri Attorney General
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Phone: (573) 751-7163
Fax: (573) 522-1720
TTY: (800) 735-2966
E-mail: excise@dor.mo.gov

Form 5301 (Revised 09-2014)



Visit <http://www.dor.mo.gov/business/tobacco/motobacco.php> for additional information.