



Missouri Tobacco Directory - Non-Participating Manufacturer Certification

Office Use

Postmark Date (MM/DD/YYYY):

____/____/____

Year and Type: Complete a separate form for each liability year for which you are certifying (select one)
Current calendar year for this certification: 20____ Type of Certification (select one): [] Initial [] Annual [] Supplemental

Manufacturer Identification: Company Name, Federal Identification Number, Mailing Address, City, State, ZIP Code, Country, Physical Address, Telephone Number, Fax Number, E-mail Address

Contact Person: Missouri Statute 32.057, RSMo, states that all tax records and information maintained by the Missouri Department of Revenue are confidential. Contact Person for Certification - Must be owner or officer. If not, Power of Attorney must be completed. Telephone Number, Name, Title, Power of Attorney Attach a completed Form 2827, E-mail Address

Manufacturing Facility: Plant Name, Plant Telephone Number, Plant Fax Number, Physical Address, City, State, ZIP Code, Country, Name and Title of Contact Person at Plant (if different than above)

Status as a Tobacco Products Manufacturer: The undersigned certifies that as of the date of this Certification, the above-named company is a Non-Participating Tobacco Products Manufacturer in full compliance with 196.1000 to 196.1003, RSMo. The company qualifies as a Non-Participating Tobacco Product Manufacturer because (select all that apply): [] The company is the fabricator of the listed brands in this Certification which are intended to be sold in the United States including cigarettes and Roll Your Own (RYO) intended to be sold in the United States through an importer. [] The company is the first purchaser anywhere for resale in the United States of cigarettes and RYO manufactured anywhere that the manufacturer does not intend to be sold in the United States. If yes, provide the name, plant address, contact person, phone and fax number of the fabricator. [] The company is a successor of any entity described above (i.e. manufacturer or first importer). If yes, provide the name, plant address, contact person, telephone number and fax number for the entity this company is succeeding.

License and Permits: U.S. Treasury, Tobacco Tax Bureau (TTB) Permit Number, Last Year Permit or License Issued, Foreign Manufacturer Permit Number (if applicable), Last Year Permit or License Issued, Provide a copy of current permit. [] Attached

Brand Family and Brand Style: A. Brand Family and Brand Style: For each brand style which the company requests for certification or for which the company received certification in a prior year, the following information is to be provided on the Form 5303 Missouri Tobacco Directory - Non-Participating Manufacturer Brands Certification:
• Name: List all brand families and styles as follows - brand family, brand style, flavor, size, and container. Those brand styles that will not be sold in the current year should be marked with an asterisk(*).
• Cigarette or Roll-Your-Own (RYO): Indicate whether the product is a cigarette or RYO.
• Packaging Submitted: Indicate if packaging sample is being submitted.
• Current Manufacturer: Include the name and address of the current manufacturer.
• Prior Manufacturer(s): Include the name and address of all prior manufacturers.
• Units Sold - Prior Year: Indicate the number of units sold during the prior calendar year.
• Units Sold - Current Year To Date: Indicate the number of units sold during the current calendar year.
• Current Trademark Holder: Include the name and address of the current trademark holder.
• Prior Trademark Holder: Include the name and address of all prior trademark holders.

B. Additional Information: Select the appropriate box(es):

- Initial or Supplemental Certification - Included with this certification is corresponding actual cigarette or RYO packaging (without tobacco) for each brand style for which the company requests certification.
- Annual Certification (No Packaging Changes) - Corresponding actual cigarette or RYO packaging (without tobacco) has been previously provided and there have been no changes to the packaging.
- Annual Certification (Packaging Changes or Brand Additions) - There have been changes to the packaging samples previously submitted or new brand styles have been added. Corresponding actual cigarette or RYO packaging (without tobacco) is included.
- FSC (Fire Safe Compliance) - Attached is a letter from the Missouri State Fire Marshal's Office indicating that the brand styles for which the company seeks certification are FSC compliant.
- Brand Responsibility - The company identified in the Manufacturer Identification section affirms that the cigarettes or RYO brands listed herein are to be considered the company's cigarette and RYO brands for the purpose of calculating the company's payments for the purposes of [Section 196.1000](#) to [196.1003, RSMo](#).
- Pursuant to Section 196.1000 – 196.1032, RSMo, the Tobacco Product Manufacturer has attached all documentation supporting the information in this certification. A non-participating manufacturer must include all documentation showing that it has met its escrow obligations for the relevant calendar year. See [Section 196.1003\(b\); 196.1023 – 196.1029, RSMo](#).

Select One	Does Not	
Response	Apply	Attach the following documents or information:
Provided	Apply	
<input type="checkbox"/>	<input type="checkbox"/>	Initial Certification
<input type="checkbox"/>	<input type="checkbox"/>	Partnership or Association: Current copy of the Certificate of Partnership or the certificate required to be filed by any state, county or municipality.
<input type="checkbox"/>	<input type="checkbox"/>	Corporation: 1) Current copy of the Certificate of Incorporation or other charter and 2) extracts of documents listing the officers authorized to sign for the company.
<input type="checkbox"/>	<input type="checkbox"/>	LLC or other entity: Current copy of the business documents filed with a state, county, or municipal entity when such filing is required. Include a copy of any document indicating persons authorized to sign for the entity.
<input type="checkbox"/>	<input type="checkbox"/>	Organizational Documents - Required With Initial Certification Only Unless Changes
<input type="checkbox"/>	<input type="checkbox"/>	No Changes to Organizational Documents: Organizational documents were submitted with the initial Certification Application. There have been no changes to the organizational documents previously submitted.
<input type="checkbox"/>	<input type="checkbox"/>	Organizational Documents Have Changed: There have been changes to the organizational documents previously submitted. Copies of all updated documents are attached.
<input type="checkbox"/>	<input type="checkbox"/>	Company Officers and Owners: Provide a list of all company officers and company owners (all persons with an equity interest of 10% or more in the company). Include name, address, phone number and e-mail address.
<input type="checkbox"/>	<input type="checkbox"/>	Affiliates: Provide a list of all company Affiliates that also manufacture, import, distribute, or sell cigarettes or Roll Your Own (RYO). Include the name, address and contact information for each Affiliate.
<input type="checkbox"/>	<input type="checkbox"/>	Marketing Information: For each brand family, list the name, address and contact information for each Missouri wholesaler through which the company intends to sell cigarettes or RYO in Missouri.
<input type="checkbox"/>	<input type="checkbox"/>	Agreements with Participating Manufacturers: Identify every agreement between the company and any Participating Manufacturer ("PM") or PM Affiliate that relates to the making, importing, distribution, transportation, or sale of each Brand Family.
<input type="checkbox"/>	<input type="checkbox"/>	Agreements Regarding Compliance with the Qualified Escrow Statute: List every Brand Family that is the subject of any agreement regarding compliance with a Qualified Escrow Statute.
<input type="checkbox"/>	<input type="checkbox"/>	Health Warning Rotation Plan: For each Brand Family, list the name and address of the entity that filed cigarette health warning rotation plan with the Federal Trade Commission. Attach the Federal Trade Commission's written approval of the company's annual Cigarette Health Warning Rotation Plan. Applies only to cigarettes.
<input type="checkbox"/>	<input type="checkbox"/>	Ingredient Report: For each Brand Family, list the name and address of the entity that submitted the ingredient reporting information to the U.S. Secretary of Health and Human Services as required by the Federal Cigarette Labeling and Advertising Act. Attach copies of all Certificates of Compliance received from the U.S. Secretary of Health and Human Services for the company's annual ingredient reporting required by the Federal Cigarette Labeling and Advertising Act (15 USC § 1335a). Applies only to cigarettes.
<input type="checkbox"/>	<input type="checkbox"/>	Imported Cigarettes: If company sells or intends to sell cigarettes or RYO brands that are not manufactured in the United States, provide the following: <ul style="list-style-type: none"> <input type="checkbox"/> A copy of the sworn statement of the original manufacturer that it will timely submit ingredient information to the Secretary of Health and Human Services as required by 19 USC §1681a(c)(1). Cigarettes Only. <input type="checkbox"/> A copy of the importer's certificate under penalty of perjury as required by 19 USC §1681a(c)(2) regarding the precise format of warnings and the rotation plan for health warning. Cigarettes Only. <input type="checkbox"/> A copy of the trademark holder's certificate under penalty of perjury that it has not withdrawn consent to import into the United States as required by 19 USC §1681a(c)(3)(A) or a copy of the importer's certificate under penalty of perjury that the trademark owner has not withdrawn consent to import into the United States as required by USC §1681a(c)(3)(B).
<input type="checkbox"/>	<input type="checkbox"/>	Internet or Mail Order Sales: If company intends to sell any Cigarettes (including RYO tobacco) by mail order or via the Internet.
<input type="checkbox"/>	<input type="checkbox"/>	Security Interest: Please identify any person or entity, other than a regulated financial institution, with a security interest or security interests in assets of the company that exceed 10% of the value of all of the company's gross assets (i.e., not counting assets after deducting liabilities). Attach all security agreements and financing statements for the security interests, and provide a listing of where the financing statements have been filed to perfect the security interests.

