TOBACCO TAX ACT

THIS PORTION IS YOUR WORKSHEET TO USE IN COMPLETING YOUR ATTACHED TAX RETURN KEEP THIS WORKSHEET FOR YOUR RECORDS

SEE REVERSE FOR COMPLETION INSTRUCTIONS

TAX REMITTER NUMBER:	FOR THE PERIOD ENDING:	
	TAX RETURN CALCULATION	AMOUNTS
1. Total Tax On Sales (From	Section B.5)	
2. Total Tax On Own Use (Fr	om Section C.5)	
3. Not Applicable		N/A
4. Total Tax Due (Line 1 +	Line 2)	
5. ADD DEBIT BALANCE / SUBT	RACT CREDIT BALANCE	
6. Not Applicable		N/A
7. Total Amount Enclosed		
[0.000.000.000.000.000.000.000.000.000.	E AMOUNTS CALCULATED IN THE ITEMS ABOVE MUST BE COPIED YOUR ATTACHED TAX RETURN	
NOTE: COMPLI	ETE SUPPORTING RECORDS MUST BE KEPT UNTIL THEIR DESTRUCTION HAS BEEN AUTHORIZED B ER OF FINANCE. FAILURE TO KEEP SUCH RECORDS WILL RESULT IN PENALTIES BEING IMPOSED.	Y THE
	DETACH AND RETURN THE BOTTOM PORTION	

TOBACCO TAX RETURN (MANUFACTURER)

(PURSUANT TO THE TOBACCO TAX ACT)



ALL APPLICABLE SECTIONS MUST BE COMPLETED

Government of Newfoundland and Labrador Department of Finance

PLEASE TYPE OR PRINT CLEARLY IN INK

Int. charged at a rate of 0.03846666% per day.

RETURN DUE DATE:

	REFORM BOLD BATE.	
TAX REMITTER NO.:		
TAX REMITTER:		AMOUNTS
		AMOUNTS
FOR THE PERIOD ENDING:	1. Total Tax On Sales (From Section B.5)	
	2. Total Tax On Own Use (From Section C.5)	
	3. Not Applicable	N/A
IF BUSINESS HAS BEEN DISCONTINUED DURING THE	4. Total Tax Due (Line 1 + Line 2)	
PERIOD, PLEASE SPECIFY:	5. ADD DEBIT BALANCE / SUBTRACT CREDIT BALANCE	
	6. Not Applicable	N/A
YEAR MONTH DAY	7. Total Amount Enclosed	

hese statements are hereby certified to be correct to the best of my knowledge and belief of the undersigned. It is a serious offense to make false stateme	ents
n this return.	

SIGNATURE OF AUTHORIZED SIGNING OFFICER:	TITLE:	
AUTHORIZED SIGNING OFFICER (Please Print or Type):	DATE:	

TELEPHONE NUMBER OF AUTHORIZED SIGNING OFFICER: _

PLEASE READ CAREFULLY

- Failure to file returns or remit the tax payable by the due date will result in interest and/or penalty being imposed.
- B. Cheques or money orders should be made payable to the Newfoundland Exchequer and forwarded to:

DEPARTMENT OF FINANCE
TAXATION AND FISCAL POLICY BRANCH
TAX ADMINISTRATION DIVISION
P.O. BOX 8720
ST. JOHN'S, NL
A1B 4K1

- C. The tax return must be properly signed by an authorized officer, director, or agent of the business and filed with the Minister not later than 20 Days after the end of the period ending shown on the return.
- D. Interest on outstanding balances is charged at a rate of 0.03846666% per day. Where full payment is not made by the due date, an additional 10% of the amount due may be imposed.
- E. Record your tax remitter number, name, and tax program on the back of your cheque or money order
- F. If no tax due, a NIL return must be filed. Line 4 must always be completed.
- G. If your business has been discontinued during the period:
 - (a) A return should be filed and the tax due remitted for the period.
 - (b) The name of the sucessor, if any, should be forwarded to the Minister of Finance, within 15 days, along with your registration certificate for cancellation.
- H. Any inquiries may be forwarded to (709) 729 6297 or toll free 1-877-729-1695.

DEPARTMENT OF FINANCE TAXATION AND FISCAL POLICY BRANCH TAX ADMINISTRATION DIVISION P.O. BOX 8720 ST. JOHN'S, NL A1B 4K1



MANUFACTURER'S NAME:

Government of Newfoundland and Labrador Department of Finance

MANUFACTURER'S MONTHLY TOBACCO ACCOUNTABILITY RETURN UNDER THE TOBACCO TAX ACT

This form must be received not later than the 20th day of the month immediately following the calendar month for which the report is made to:

TAX ADMINISTRATION DIVISION, DEPARTMENT OF FINANCE, P.O. BOX 8720, ST. JOHN'S, NL A1B 4K1

WHOLESALER'S LICENCE NUMBER:	PERIOD COVE	PED.					
	FROM:	CED:		TO:			
SECTION A. TOBACCO PRODUCTS		AN A D V					
	DALES SON	IMAKI		QUANTIT	Ϋ́		
TOBACCO PRODUCT		N	MARKED		UNMA	RKED	
1. NUMBER OF CIGARETTES/PRE-PORTIONED STI (From Section E.4 and G.1)	CKS						
2. NUMBER OF CIGARS (From Section I.2 and I.7)		NOT A	APPLICABLE	3			
3. NUMBER OF GRAMS OF FINE CUT (From Section E.4 and G.1)							
4. NUMBER OF GRAMS OF OTHER TOBACCO (From Section I.2 and I.7)		NOT A	APPLICABLE	E			
SECTION B. TOBACCO TAX CALCU	JLATION - T	'AXABLE SALE	ES	***************************************			
TOBACCO PRODUCT		QUANTITY .		RATE ents)	TA	X	
1. NUMBER OF CIGARETTES/PRE-PORTIONED STIC (From Section E.7)	CKS						
2. CIGARS (From Section J.1)	NO	T APPLICABLE		OT ICABLE			
3. NUMBER OF GRAMS OF FINE CUT (From Section E.7)							
4. NUMBER OF GRAMS OF OTHER TOBACCO (From Section I.7)							
5. TOTAL TAX ON SALES							
SECTION C. TOBACCO TAX CALCU	JLATION - C	WN USE					
TOBACCO PRODUCT		QUANTITY		RATE ents)	TA	X	
1. NUMBER OF CIGARETTES/PRE-PORTIONED STIC (From Section E.4)	CKS						
2. CIGARS (From Section J.2)	NO	T APPLICABLE		OT CABLE			
3. NUMBER OF GRAMS OF FINE CUT (From Section E.4)							
4. NUMBER OF GRAMS OF OTHER TOBACCO (From Section I.4)							
5. TOTAL TAX ON OWN USE							
Approval may be obtained from the	Department	of Finance to s	ubmit a con	nputer produ	uced facsimile	of this for	m.

MANUFACTURER'S MONTHLY TOBACCO ACCOUNTABILITY RETURN GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

SECTION D. SUMMARY OF NEWFOUNDLAND AND LABRADOR MARKED TOBACCO PRODUCTS ON HAND, PRODUCED AND ACQUIRED

	NUMBER OF CIGARETTES/ NUMBER OF GRAMS OF PRE-PORTIONED STICKS FINE CUT TOBACCO
1. OPENING INVENTORY (Attach Details)	
2. PRODUCTION IN THE MONTH (Attach Details)	
3. IMPORTS INTO CANADA (Attach Details)	
4. OTHER PURCHASES (Attach Details)	
5. TOTAL (Sum of 1 + 2 + 3 + 4) (Total of This Section Must Equal Total of Section E)	

SECTION E. SUMMARY OF NEWFOUNDLAND AND LABRADOR MARKED TOBACCO PRODUCTS SOLD, USED AND ON HAND

SOLD, OSED AND ON HAND									
	NUMBER OF CIGARETTES/ PRE-PORTIONED STICKS	NUMBER OF GRAMS OF FINE CUT TOBACCO							
1. CLOSING INVENTORY (Attach Details)									
2. TAX MEMO SALES TO WHOLESALERS IN NEWFOUNDLAND AND LABRADOR (Attach Details)									
SALES INTO OTHER 3. PROVINCES (Attach Details)									
4. OWN USE IN NEWFOUNDLAND AND LABRADOR (Attach Details)									
5. TRANSFERS TO DRY STOCK (Attach Details)									
6. SHORTAGE (OVERAGE) (Attach Details)									
7. TAXABLE SALES IN NEWFOUNDLAND AND LABRADOR (Attach Details)									
8. TOTAL (Sum of 1 + 2 + 3 + 4 + 5 +/- 6 + 7) Total of This Section Must Equal Total of Section D)									

SECTION F. SUMMARY OF UNMARKED CIGARETTES/PRE-PORTIONED STICKS AND UNMARKED FINE CUT TOBACCO ON HAND AND TRANSFERRED IN

10011000 011 111111	7 II VD II WII VOI LICCED II V									
	NUMBER OF (PRE-PORTIO		NUMBER OF GRAMS OF FINE CUT TOBACCO							
MARKING STATUS	CANADA DUTY PAID	DUTY FREE	CANADA DUTY PAID	DUTY FREE						
OPENING INVENTORY (Attach Details)										
2. TRANSFERS IN (Attach Details)										
3. TOTAL (Sum of 1 + 2) (Must Equal Total of Section G)										

MANUFACTURER'S MONTHLY TOBACCO ACCOUNTABILITY RETURN GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

WHOLERSALER'S LICENCE NUMBER MANUFACTURE	ER'S	NA:	ME																				
SECTION G. SUMMARY OF UNMARKED (TOBACCO SOLD, USED AND	CIGA	ARE	ETT A NI	ES.	/PR	E-P	OR'	TI(ONI	ED	STI	CK	S A	NI) U	NN	1AI	RKE	ED I	FIN	ΈC	UT	ı
			N	IUM	BER																AS C		
MARKING STATUS	CA	ANA			TY F		Т	DUTY FREE				FINE CUT T					T						
1. SALES TO WHOLESALERS (Attach Details)																							
TRANSFERS OUT (Attach Details)													T										
3. TRANSFERS TO DRY STOCK (Attach Details)													\vdash										
4. SHORTAGE (OVERAGE) (Attach Details)																							
5. CLOSING INVENTORY (Attach Details)																							
6. TOTAL (Sum of 1 + 2 + 3 + 4 + 5) (Must Equal Total of Section F)										1													
SECTION H. SUMMARY OF CIGARS AND TRANSFERRED IN	OTF	IER	R T()BA	ACC	CO	(PIF	PE,	CU	JT,	PL	JG	AN	ND	SN	UF.	F) (ON	HA	NI) Al	ND	
MARKING STATUS	0.4		-			CIG	-												-)BA(_	
OPENING INVENTORY	GA	.NAI	DA .	l DOJ	ry P	AID		 U	UTY	Y F1	L EE	1	CA	NAI I	DA I	l DUI	Y P	AID		D1	UTY	FRI	EE I
1. (Attach Details) TRANSFERS IN										_													
2. (Attach Details) TOTAL (Sum of 1 + 2)																							
3. (Must Equal Total of Section I)																							
SECTION I. SUMMARY OF CIGARS AND AND ON HAND	OTE	IER	T()BA	ACC	CO (PIP	PΕ,	CU	JT,	PLU	JG	AN	ID :	SNI	UFI	F) S	SOL	LD,	US:	ED		
MARKING STATUS	CA	NIAI	D A T	DITT	Y P.	CIG.	ARS		TITTE	7 171	TT		C A					_	-		BAC		
1. CLOSING INVENTORY 1. (Attach Details)	CA	 				AID		ע	UTY 		EE_		GA	NAI	DA I	01	Y P			DU	UTY 	FRE	EE
2. SALES TO WHOLESALERS IN NEWFOUNDLAND AND LABRADOR (Attach Details)																	L						
3. TRANSFERS OUT (Attach Details)																L	<u> </u>						
4. OWN USE IN NEWFOUNDLAND AND LABRADOR (Attach Details)																							
5. TRANSFERS TO DRY STOCK (Attach Details)																							
6. SHORTAGE (OVERAGE) (Attach Details)																							
7. TAXABLE SALES IN NEWFOUNDLAND AND LABRADOR (Attach Details)																							
8. TOTAL (Sum of 1 + 2 + 3 + 4 + 5 +/- 6 + 7) (Must Equal Total of Section H)																							
																						1	

MANUFACTURER'S MONTHLY TOBACCO ACCOUNTABILITY RETURN GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

SECTION J. TOBACCO TAX CALCULATION ON TAXABLE SALES OF CIGARS AND OWN USE OF CIGARS (Attach Additional Pages as Necessary)

	(1) MANUFACTURER'S SUGGESTED RETAIL PRICE PER PACKAGE	(2) TOTAL NUMBER OF PACKAGES	(3) TAX RATE	TOTAL TAX (1 X 2 X 3)
	\$		125%	\$
1. TAXABLE SALES	\$		125%	\$
I. TAXABLE SALES	\$		125%	\$
	TOTAL TAX - TAXABLE S.	ALES	\$	
2. OWN USE	\$		125%	\$
	\$		125%	\$
	\$		125%	\$
	TOTAL TAX - OWN USE			\$

CERTIFICATION

THE ABOVE STATEMENTS AND INFORMATION IN THE SUPPORTING PAGES ARE HEREBY CERTIFIED TO BE CORRECT TO THE BEST KNOWLEDGE AND BELIEF OF THE UNDERSIGNED. I UNDERSTAND IT IS A SERIOUS OFFENCE TO MAKE A FALSE STATEMENT IN THIS RETURN.

THIS RETURN MUST BE SIGNED BY:

- (A) THE OWNER IF A PROPRIETORSHIP, OR
- (B) ONE PARTNER IF A PARTNERSHIP, OR
- (C) ONE OFFICER/DIRECTOR IF A CORPORATION

NAME (PRINT):			
TITLE:			
PHONE NO.:	()	EXT:	
DATE:			
SIGNATURE:			