REPEAL

DEPARTMENT OF JUSTICE PAGE 1 of 2

LE 1 104555-104557)

ATTOM ACT GRAN	STATE OF CALIFORNIA JUS-TOB4 (Rev. 02/2011)	BRAND FAMILIES UNIT SALE (Rev. & Tax Code § 30165.1, Health & Sa	
		Print Form Save Form	Reset Fo

P	Print Form	Save Form	Reset Form			
Original Amended Date:			SALES YEAR: 20			
THE FORM MUST BE SUBMITTED WITH THE CERTI	FICATE OF	COMPLIANCE (JUS	-TOB3) FOR THE SPECIFIED REPORTING PERIOD.			
Company is a (Check One): Manufacturer Importer						
Company Name:		Board of Equa	lization License Number:			
Street Address:						
	E-mail Address:					
	by more frequently than annually, indicate the specified reporting period for which deposit was made.					
Reporting Period: From (month/date/year):						
			_ /			
Column A: List all Brand Families sold during this report Column B: Write "C" after any brand style of Cigarette	tes, (RYO) afte	er any brand of Roll-Yo	our-Own tobacco, and "LC" after any brands of Little Cigars.			
individual Little Cigar or .09 oz. of RXO.)			y of other specified period. (1 Unit = an individual cigarette or			
Column D: If the reporting company is not the manufacture.	facturer (i.e. fa	bricator), provide the n	name and street address of the manufacturer(s).			
Attach additional sheets, as necessary, to provide a complete	answer.					
A	В	6	D 1			
BRAND FAMILY NAME(S)	PRODUCT TYPE	UNITS SOLD	MANUFACTURER (i.e. FABRICATOR) NAME & ADDRESS			
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Complete information and declaration on page 2.						
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BRAND FAMILIES UNIT SALES SCHEDULE 1 (Rev. & Tax Code § 30165.1, Health & Saf. Code §§ 104555-104557)

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Company Name:				/	
	-				
This page requires the company to report the total sales r	nade in California	during the <u>preceding</u> c	alendar year. Rev. & T	Гах Code § 30165.1(b)(2)(a).	
Column A: List all Brand Families sold in the pre Column B: Write "C" after any brand style of Cig Column C: List the total units sold in California d RYO.) Column D: If the reporting company is not the m the Brand Family.	arettes, (RYO) afte uring the preceding	er any brand of Roll-You g calendar year. (1 Unit	ur-Own tobacco, and "L t = an individual cigaret	_C" after any brands of Little Cigars. tte or individual Little Cigar or .09 oz	. of
Attach additional sheets, as necessary, to provide a comp	alete answer			,	
A	B	E C			
BRAND FAMILY NAME(S)	PRODUCT	TOTAL UNITS	MANUFAC	D CTURER (i.e. FABRICATOR) NAME & ADDRESS	
				V.III. G. IDBREEO	
			//		
			/		
Under penalty of perjury, under the laws of California, I de nformation contained in this form is complete and accurat	clare that I am aut	horized to certify, on be	thalf of the reporting co	ompany named above, that all of the	
Signature of Company Officer:	\times		Date:		
Print Company Officer Name:		Phone		Fax No:	
Print Company Officer Title:			Address:		