



STATE OF NEVADA
OFFICE OF THE ATTORNEY GENERAL
5420 Kietzke Lane, Suite 202
Reno, Nevada 89511

**NON-PARTICIPATING MANUFACTURER (NPM) QUARTERLY CERTIFICATE OF COMPLIANCE
FORM BOT-TOB3**

PART I: TOBACCO PRODUCT MANUFACTURER IDENTIFICATION

A. Company Information

Company Name	
Address	
City/State/Zip/Country	
Telephone Number	Fax Number
E-Mail Address	Website
Name/Title of Company Contact	

PART II: LIABILITY REPORTING PERIOD

- First Quarter: January 1 through March 31, 2017**
April 30, 2017: Escrow deposit to Nevada sub-account.
May 10, 2017: NPM Quarterly Certificate of Compliance received by Attorney General.
May 10, 2017: Account letter submitted by bank to the Attorney General.
- Second Quarter: April 1 through June 30, 2017**
July 31, 2017: Escrow deposit to Nevada sub-account.
August 10, 2017: NPM Quarterly Certificate of Compliance received by Attorney General.
August 10, 2017: Account letter submitted by bank to the Attorney General.
- Third Quarter: July 1 through September 30, 2017**
October 31, 2017: Escrow deposit to Nevada sub-account.
November 10, 2017: NPM Quarterly Certificate of Compliance received by Attorney General.
November 10, 2017: Account letter submitted by bank to the Attorney General.
- Fourth Quarter: October 1 through December 31, 2017**
January 31, 2018: Escrow deposit to Nevada sub-account.
February 10, 2018: NPM Quarterly Certificate of Compliance received by Attorney General.
February 10, 2018: Account letter submitted by bank to the Attorney General.

Please note that the failure to submit this certificate by the applicable deadlines may result in the assessment of a civil penalty up to \$1,000 per day. In addition, if an NPM fails to make timely and accurate escrow payments, the Nevada Attorney General may require that NPM to post a surety bond for a period of five years as a condition of continued directory listing.

**NPM QUARTERLY CERTIFICATE OF COMPLIANCE
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PART III: QUARTERLY UNITS SOLD TOTAL

Provide the total units sold (cigarettes & Roll-Your-Own tobacco) by the NPM in Nevada during the quarter. This total includes units sold by the NPM on tribal land located in Nevada during the quarter.

Brand Family Name	Distributor Name/City/State	Total Sticks of Cigarettes Sold This Quarter Bearing Nevada Cigarette Stamps	Total Ounces of RYO Tobacco Sold During This Quarter
Subtotal of RYO Ounces		N/A	
Total Quarter Stick Counts (RYO oz to stick conversion: .09 oz = 1 stick)			
Total Combined Sticks Sold (Cigarette sticks + RYO sticks sold this quarter)			

PART IV: QUARTERLY ESCROW CALCULATION

A. Escrow Account Information

The NPM identified in Part I has established and continues to maintain the following qualified escrow fund as required under NRS Chapter 370A:

Name of Financial Institution	
Address	City/State/Zip/Country
Contact Name/Title	
Telephone Number	Fax Number
Escrow Account Number	Nevada Sub-Account Number

B. Quarterly Escrow Calculation for 2017 Sales

1.	Enter on Line A the total sticks sold by the NPM in Nevada during the quarter, including sales on tribal land (units sold) from page 2.	A. _____ (units)
2.	Line B contains the applicable rate per unit sold in 2017 (\$0.0188482), plus the inflation adjustment for 2017 (\$0.0148934).	B. <u>\$ 0.0337416</u>
3.	Multiply Line A and B to determine the total escrow due for the quarter.	C. _____

Any required escrow payment for the quarter must be deposited into the segregated Nevada sub-account by the due date indicated in Part II. You must ensure your escrow agent provides proof of the deposit to the Attorney General’s Office no later than the deadline to submit this quarterly certificate of compliance.

The Financial Institution/Escrow Agent noted above is required to provide **directly** to the Tobacco Enforcement Unit of the Nevada Attorney General’s Office the following:

1. Proof of amount and date of deposit to Nevada’s segregated sub-account for the 2017 quarterly sales.
2. A current account ledger of the tobacco product manufacturer’s segregated sub-account for Nevada.

PART V: ADDITIONAL INFORMATION

- A. The Registered Agent identified in the NPM's most recent Annual Certification has not changed since that certification. Yes No
- B. The financial institution information provided in the NPM's most recent Annual Certification has not changed since that certification. Yes No
- C. The Escrow Agreement provided in the NPM's most recent Annual Certification has not changed since that certification. Yes No
- D. The manufacturer has submitted all monthly PACT Act reports to the Nevada Attorney General and the Nevada Department of Taxation for this quarter. Yes No
- E. The manufacturer has attached a copy of the most recent executed bond, if required under NRS 370.682. Yes No Not Applicable
- F. If the NPM responded 'no' to A, B, C, D, or E in above under Part V, please provide an explanation in an attachment. **EXHIBIT** _____

PART VI: AFFIDAVIT OF TOBACCO MANUFACTURER

An authorized officer of the NPM MUST sign this form under penalty of perjury.

I certify that:

The NPM named in Part I is in full compliance with all applicable sections of NRS Chapters 370 and 370A;

I am an authorized officer of the NPM and through my position with the NPM I am authorized to certify on behalf of the NPM and can legally bind the NPM;

I understand that the Nevada Attorney General may require additional information and/or documentation to determine the veracity of assertions and representations made in this certification;

I have examined this certification, including attachments and supporting documents, and, to the best of my knowledge and belief, this certification is true, correct, and complete;

I understand that under Nevada Chapter 370.670(2), the NPM is required to maintain all invoices, documentation of sales, and any other documentation relied upon in making this certification for a period of five years from the date this certification is executed;

By signing this affidavit on behalf of the NPM I understand that the NPM is required to comply with state and federal laws concerning the sale of tobacco products.

I declare under penalty of perjury under the law of Nevada that the foregoing is true and correct.

Name of Officer

Title

Signature of Officer

Date

Email this completed Certificate of Compliance and any attached exhibits to:

**Nevada Attorney General's Office
Tobacco Enforcement Unit
Attn: Elizabeth H. Hickman, Deputy Attorney General**

Phone: (775) 687-2144

Fax: (775) 688-1822

Email: tobaccoenforcement@ag.nv.gov