

# **STATE OF NEVADA**

# P.A.C.T. Act Monthly Report

**BUSINESS IDENTIFICATION AND REPORTING PERIOD** 

Any illegible or incomplete report will be returned and deemed unfiled.

Business Name						
Address (Mailing and Physical)						
City/State/County						
Phone Number		Fax Number				
Email	Email		Business Website			
Name/Title of Person to be Contacted						
Nevada Retailer License Number		Federal Employer Identification Number				
Nevada Registered Agent		Registered Agent Phone Number				
Reporting Period (Month/Year)						
WEBSITE IDENTIFICATION						
For the reporting period, identify all we	ehsites on which	th your company advertised the avai	ilability of delivery			
		o products into the State of Nevada.	identify of denitory			
	other tobacci	·				
WEBSITE NAME		WEBSITE ADDRESS				
REPORT ALL SALES FOR THE REPORTING PERIOD USING EITHER APPENDIX A (SALES OF CIGARETTES) OR APPENDIX B (SALES OF OTHER TOBACCO PRODUCTS) AND ATTACH THE COMPLETED FORM(S) TO THIS REPORT. THIS REPORT WILL NOT BE DEEMED RECEIVED AND FILED UNLESS ACCOMPANIED BY A RECORD OF SALES MADE DURING THE REPORTING PERIOD.  All State excise taxes for the reported sales have been remitted to the State of Nevada.						
Under penalties of perjury, I state that I have examined this report and all attachments hereto, and, to the best						
of my knowledge, the information provided is true, correct, and complete. I also state that such information is taken from the books and records of the business for which this report is filed.						
Signature of owner or officer	Name and Title	(Printed)	Date			
Signature of preparer	Name and Title	(Printed)	Date			

Attn: Tobacco Division 1550 College Parkway, Suite 115 Carson City, Nevada 89706 Taxation-AdminMSA@tax.state.nv.us

APPENDIX A – RECORD OF SALES OF CIGARETTES INTO THE STATE OF NEVADA							
Date of Sale://	Invoice:	Units Sold (Sticks):					
Brand:	UPC:	Total Sale Price: \$					
Buyer:	Address:	•	FEIN:	License #:			
Deliverer:	Address:		Phone:				
Date of Sale:/	Invoice:	Units Sold (Sticks):					
Brand:	UPC:	Total Sale Price: \$					
Buyer:	Address:	•	FEIN:	License #:			
Deliverer:	Address:		Phone:				
Date of Sale://	Invoice:	Units Sold (Sticks):					
Brand:	UPC:	Total Sale Price: \$					
Buyer:	Address:	•	FEIN:	License #:			
Deliverer:	Address:		Phone:				
Date of Sale:/	Invoice:	Units Sold (Sticks):					
Brand:	UPC:	Total Sale Price: \$					
Buyer:	Address:	•	FEIN:	License #:			
Deliverer:	Address:		Phone:				
Date of Sale://	Invoice:	Units Sold (Sticks):					
Brand:	UPC:	Total Sale Price: \$					
Buyer:	Address:	•	FEIN:	License #:			
Deliverer:	Address:		Phone:				
Date of Sale:/	Invoice:	Units Sold (Sticks):					
Brand:	UPC:	Total Sale Price: \$					
Buyer:	Address:		FEIN:	License #:			
Deliverer:	Address:		Phone:	1			

APPENDIX B – RECORD OF SALI	ES OF OTHER TOBACC	O PRODUCTS I	NTO THE STA	TE OF NEVADA	
Date of Sale:/	Invoice:	Type (Select):	Total Weight	Wholesale list price	
Brand:	UPC:	1	Quantity	Retail sales price	
Buyer:	Address:		FEIN:	License #:	
Deliverer:	Address:		Phone:		
	1	Type (Select):	Total Weight	Wholesale list price	
Date of Sale:/	Invoice:	-			
Brand:	UPC:		Quantity	Retail sales price	
Buyer:	Address:	•	FEIN:	License #:	
Deliverer:	Address:		Phone:		
Date of Sale://	Invoice:	Type (Select):	Total Weight	Wholesale list price	
		1	Quantity	Retail sales price	
Brand:	UPC:				
Buyer:	Address:		FEIN:	License #:	
Deliverer:	Address:		Phone:		
	•				
Date of Sale:/	Invoice:	Type (Select):	Total Weight	Wholesale list price	
Brand:	LIDC	1	Quantity	Retail sales price	
Buyer:	UPC:		FEIN:	License #:	
	Address		Dhono		
Deliverer:	Address:		Phone:		
	T	T (0.1)	Language	L will also to Bar and a	
Date of Sale://	Invoice:	Type (Select):	Total Weight	Wholesale list price	
Brand:	UPC:		Quantity	Retail sales price	
Buyer:	Address:		FEIN:	License #:	
Deliverer:	Address:		Phone:		
	I	Type (Select):	Total Weight	Wholesale list price	
Date of Sale:/	Invoice:	1	Quantity	Retail sales price	
Brand:	UPC:		Quantity	itelali sales price	
Buyer:	Address:		FEIN:	License #:	
Deliverer:	Address:		Phone:	1	

# State of Nevada P.A.C.T. Act Monthly Report Information and Instructions

## **General Information**

#### What does the P.A.C.T. Act refer to?

The Prevent All Cigarette Trafficking Act of 2009 is commonly referred to as the PACT Act. Senate Bill 1147 was signed and became public law 11-154. It is the purpose of this Act to:

- Require internet and other remote sellers of cigarettes and smokeless tobacco to comply with the same laws that apply to law-abiding tobacco retailers;
- Create strong disincentives to illegal smuggling of tobacco products;
- Provide government enforcement officials with more effective enforcement tools to combat tobacco smuggling;
- Make it more difficult for cigarette and smokeless tobacco traffickers to engage in and profit from their illegal activities;
- Increase collections of Federal, State and local excise taxes on cigarettes and smokeless tobacco; and,
- Prevent and reduce youth access to inexpensive cigarettes and smokeless tobacco through illegal internet or contraband sales.

#### Who must file this report?

You must file this report if you advertise, offer for sale, sell, transfer, or ship (for profit) cigarettes or smokeless tobacco in interstate commerce. These products must be shipped into another state, locality, or Indian nation that taxes the sale or use of cigarettes or smokeless tobacco products.

NOTE: Prior to advertising the sale or transfer of tobacco products into the State of Nevada, you must register with the United States Attorney General and the Nevada Department of Taxation as required by the P.A.C.T. Act.

## **Instructions**

#### When do I file?

The report is due no later than the 10<sup>th</sup> day of each calendar month for the previous calendar month's shipments.

#### Where do I send the report?

To report the delivery of tobacco sales into the State of Nevada, mail your report to:

Office of the Attorney General Nevada Department of Taxation

Tobacco Enforcement Division Attn: Tobacco Division

5420 Kietzke Lane, Suite 202 1550 College Parkway, Suite 115

Reno, NV 89511 Carson City, NV 89706

tobaccoenforcement@ag.nv.gov Taxation-AdminMSA@tax.state.nv.us

### **Business Identification and Reporting Period**

License number – Write the license number issued to you by the Nevada Department of Taxation.

Nevada registered agent – if making delivery sales into the State of Nevada, you are required to have a registered agent within Nevada.

Reporting period – Reporting periods run from the first day of a calendar month to the last day of that month.

#### **Website Identification**

Pursuant to the P.A.C.T. Act, delivery sellers are required to provide any website addresses on which an advertisement or offer for delivery sales is disseminated. All website addresses on which such an advertisement is made must be provided, regardless of whether any sales were made during the reporting period as a result of that website.

### **Reports of Sales**

Reports of sales are to be made using either Appendix A for sales of cigarettes, or Appendix B for sales of other tobacco products.

*UPC* – Write the UPC carton code.

*FEIN or License #* - Write the Federal Employers Identification number and the Nevada license number. If you are making a delivery sale to a consumer, leave these lines blank.

Deliverer name, address and phone – Complete only for delivery sales and provide the information of the person/company who delivered the cigarettes for you.

*Units sold (sticks)* – For cigarette sales, list the total number of *cigarettes* sold. <u>Do not report in either packs or cartons.</u> *Type* – For other tobacco products, identify the type of tobacco product for which you are reporting. If the type is sold in ounces, report in ounces. Otherwise, report in the quantity of units sold.

State excise taxes – Check the box to verify that state excise taxes have been remitted to the State of Nevada for the reported sales. If no state excise taxes have been remitted, attach an explanation.