SUPPORTING SCHEDULE 3A

OFFICE OF STATE TAX COMMISSIONER

SFN 23507 (5-01)

(Attach to Form 44CT)

North Dakota Cigarette and Tobacco Products Tax Monthly Return

Taxpayer's Name	For the month of:	Year:	License #

Check One: ❑ Tobacco products imported or acquired ❑ Other credit-unsaleable or destroyed tobacco products

Schedule 3A

Purchases of cigars and tobacco products received during the month

Name of Supplier	Invoices		Wholesale purchase price of cigars and pipe tobacco	Ounces of Snuff	Ounces of chewing and plug tobacco
	Date	Number			
Total purchase of snuff or chewing tobacco products with no listed weight from Schedule 3B					
Total purchase price of pipe tobacco and cigars					
Total purchases (ounces) of snuff					
Total purchases (ounces) of chewing tobacco					