

Department of Revenue Services
 State of Connecticut
 Excise/Public Services Taxes Subdivision
 25 Sigourney Street
 Hartford CT 06106

Schedule A-3

Tobacco Products Tax - Resident Distributor

Snuff tobacco products activity report

(Rev. 01/02)

Enter the total of Schedule A-3 on Line 9 of **Form OP-300, Tobacco Products Tax Return.** Attach Schedule A-3 to the return.

Name _____ Period Ending _____ CT Tax Registration Number _____

Address _____

Invoice Number	Date	Purchased, Imported, Received, or Acquired From	Brand Name	Quantity	Weight Each <i>(in ounces)</i>	Total Weight <i>(Col. 5 x 6)</i>	Tax <i>(Col. 7 x 0.40)</i>
Column 1	Column 2	Column 3	Column 4	Column 5	Column 6	Column 7	Column 8
Schedule A-3 Subtotal						1.	
List the amount reported on Schedule C-1 (You must attach a copy of Schedule C-1 to Schedule A-3)						2.	()
Subtract Line 2 from Line 1. Report this amount on Line 9 of Form OP-300						Total	3.