

State of Wisconsin  
**Participating or Non-Participating Manufacturer Certification – Brand Disclosure**

**Schedule B** **IMPORTED Roll-Your-Own (RYO / MYO) Cigarette Tobacco Brands**

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Foreign Manufacturer Name		Certification for Sales Year <b>2026</b>	
Authorized Importer's Name	Authorized Importer's Federal Permit No. <b>- TI -</b>	Authorized Importer's WDOR Permit No.	

**BRAND INFORMATION**

**IMPORTANT** ALL brands manufactured and still available for sale to consumers on the U.S. market, on or after May 23, 2000, **MUST** be listed. Failure to disclose all brands on this application is cause for delisting and/or denial of all attributed brands.

**IMPORTED BRANDS** – Brands manufactured outside the United States (U.S.) for sale in the U.S. by the manufacturer above and imported under the federal permit above. *If all the information is the same for multiple brands, you may submit one schedule for multiple Brand Reference Nos. (i.e. B-1 to B-7; B-8 to B-16).*

▼ Mark this box with an "X" to indicate brands you are requesting certification for sale and distribution in Wisconsin for this certification sales year.

<input checked="" type="checkbox"/>	1. Brand Name	2. Brand Style	3. MSA Status (check one) <input type="checkbox"/> PM <input type="checkbox"/> NPM	4. Brand Reference No.
5. Cigarette Tobacco Imported as (check one) <input type="checkbox"/> Loose Bulk <input type="checkbox"/> Packaged / Brand Labeled		6. Price per Package / Bag to Distributor for Sale & Distribution in Wisconsin: Packaging / Ounces (Oz.) per Bag.      Oz. \$ <input type="checkbox"/> <b>Provided as Exhibit H</b>		
7. Trademark Owner(*): a. Legal Name >>		b. Doing Business As (DBA) Name		
7c. Address:		Street Address	City	State / Province      Country      Zip Code
8. Physical Location(s) where this cigarette tobacco is packaged for individual sale (i.e. not bulk) >>		Street Address	City	State / Province      Country      Zip Code
8a. Name of owner of this plant / facility		8b. Date First Manufactured	8c. Date Last Manufactured or N/A if currently Manufactured      Reason: <input type="checkbox"/> Discontinued <input type="checkbox"/> Other (explain)	
8d. Is this the sole facility where this process occurs for this brand / brand style? <input type="checkbox"/> Yes <input type="checkbox"/> No      If No, please explain and complete additional Schedule B for other location(s) and attach.				
9. Exporter: a. Legal Name >>		b. Doing Business As (DBA) Name		
9c. Address:		Street Address	City	State / Province      Country      Zip Code
10. Date First Exported to U.S.	11. Date Last Exported to U.S.	Reason: <input type="checkbox"/> Discontinued <input type="checkbox"/> Other (explain)		12. Date First Imported into U.S.
				13. Date Last Imported into U.S.
				Reason: <input type="checkbox"/> Discontinued <input type="checkbox"/> Other (explain)

**All fields must be completed.**