

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

**Schedule C**    **IMPORTED Little Cigar Brands**

Page \_\_\_\_\_ of \_\_\_\_\_

Foreign Manufacturer Name			Certification for Sales Year <b>2025</b>
Authorized Importer's Name	Authorized Importer's Federal Permit No. <b>- TI -</b>	Authorized Importer's WDOM Permit No. <b>TIMP -</b>	

**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 information is the same for multiple brands, you may submit one schedule for for multiple Brand Reference Numbers (i.e. C-1 to C-7; C-8 to C-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 <i>(check one)</i> <input type="checkbox"/> PM <input type="checkbox"/> NPM	4. Brand Reference No.
5. Price per Carton to Distributor for Sale & Distribution in Wisconsin:		5a. Price \$	5b. Price List <input type="checkbox"/> <b>Provided as Exhibit H</b>	
6. Trademark Owner(*): a. Legal Name >> _____ b. Doing Business As (DBA) Name _____				
6c. Address: _____ Street Address _____ City _____ State / Province _____ Country _____ Zip Code _____				
7. Physical Location(s) where these Little Cigars are fabricated >> _____ Street Address _____ City _____ State / Province _____ Country _____ Zip Code _____				
7a. Name of owner of this plant / facility		7b. Date First Manufactured	7c. Date Last Manufactured or N/A if currently Manufactured    Reason: <input type="checkbox"/> Discontinued <input type="checkbox"/> Other <i>(explain)</i>	
7d. Is this the sole facility where this brand / brand style is fabricated? <input type="checkbox"/> Yes <input type="checkbox"/> No    If No, please explain and complete additional Schedule C for other location(s) and attach.				
8. Exporter: a. Legal Name >> _____ b. Doing Business As (DBA) Name _____				
8c. Address: _____ Street Address _____ City _____ State / Province _____ Country _____ Zip Code _____				
9. Date First Exported to U.S.	10. Date Last Exported to U.S.	Reason: <input type="checkbox"/> Discontinued <input type="checkbox"/> Other <i>(explain)</i>	11. Date First Imported into U.S.	12. Date Last Imported into U.S.
Reason: <input type="checkbox"/> Discontinued <input type="checkbox"/> Other <i>(explain)</i>				

**All fields must be completed.**