

Instructions – Non-Resident Distributor’s Certification

The *Non-Resident Distributor’s Certification* requires you to identify (under penalty of perjury) whether you conducted any of the following activities:

- Affixing the excise tax stamp of the State of Arizona to (or otherwise paying the Arizona excise tax on) a Non-Participating Manufacturer’s Cigarettes. Such activity must be identified on Schedule A-6 of Form 800NR.
- Paying the Arizona excise tax on any Non-Participating Manufacturer’s Roll-Your-Own Tobacco. Such activity must be identified on Schedule A-4 of this return.

The *Non-Resident Distributor’s Certification* is part of this return and must be completed each month regardless of whether you have conducted any tobacco distributor activity during the month. Failure to complete the *Non-Resident Distributor’s Certification* may result in your return being rejected as incomplete.

Non-Resident Distributor's Certification

LEGAL BUSINESS NAME/DBA NAME	TOBACCO LICENSE NO.	FOR TAX REPORTING PERIOD M M Y Y Y Y
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As evidenced by my signature below, I, _____, do hereby
(print/type name)

certify under penalty of perjury that during the period shown above, the distributor named above:

- 1 DID NOT affix the excise tax stamp of the State of Arizona to or otherwise pay state excise taxes for any nonparticipating manufacturer's *cigarettes* required to be reported on Schedule A-6 of **Form 800NR**.

OR

- HAS engaged in this activity and has completed and submitted Schedule A-6 with **Form 800NR**.*

- 2 DID NOT pay state excise tax for any nonparticipating manufacturer's *roll-your-own tobacco* required to be reported on Schedule A-4 of **Form 819NR**.

OR

- HAS engaged in this activity and has completed and submitted Schedule A-4 with **Form 819NR**.*

SIGNATURE (Must be signed to be considered complete):

TAXPAYER'S OR AUTHORIZED AGENT'S SIGNATURE

DATE

TITLE