

# OKLAHOMA ATTORNEY GENERAL - TOBACCO ENFORCEMENT



## NON-PARTICIPATING TOBACCO MANUFACTURER'S CERTIFICATE OF COMPLIANCE WITH YEARLY ESCROW PAYMENT REQUIREMENT ON SALES IN 2025

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### Line 1: Tobacco Manufacturer's Identification

Name:	<input type="text"/>		
Address:	<input type="text"/>		
Phone:	<input type="text"/>	Facsimile:	<input type="text"/>
Email:	<input type="text"/>		
Brand Name(s) Manufactured:	<input type="text"/>		
Location of Manufacturing Facility(s):	<input type="text"/>		

### Line 2: Sales in 2025

Quarter No.:

### Line 3: Units Sold in Oklahoma in 2025

Number of individual cigarettes and "roll-your-own" tobacco sold in Oklahoma by the Manufacturer - whether sold directly or through a distributor, retailer or similar intermediary or intermediaries:

Cigarettes Sold in Oklahoma in 2025:	<input type="text"/>
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RYO (0.09 ounces of RYO tobacco is counted as 1 unit):	<input type="text"/>
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### Line 4: Base Escrow Amount

The Base Escrow Amount is determined by multiplying the number of units sold, from Line 3, by \$0.0188482.

Base Escrow Amount:	<input type="text"/>
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### Line 5: Inflation Adjustment (Estimated)

The Inflation Adjustment is determined by multiplying the Base Escrow Amount, from Line 4, by **144.397343%** (or, **\$0.0272163** per unit).

Inflation Adjustment:

**Line 6: Total Escrow Payment Due**

The Total Escrow Payment Due is determined by adding the Base Escrow Amount, from Line 4, to the Inflation Adjustment, from Line 5 (or, **\$0.0460645** per unit sold).

Total Escrow Payment Due:

**Line 7: Amount Deposited in Escrow Account**

Total Amount Deposited in the Escrow Account for the State of Oklahoma based on sales in Oklahoma in 2025, (should be an amount not less than the amount of the Total Escrow Payment Due, from Line 6).

Amount Deposited in Escrow  
Account:

**Line 8: Financial Institution**

Name of Financial Institution:

Address:

Escrow Account No.:

Phone No.:

Email:

Please mail escrow deposit confirmation documents to:

Office of the Oklahoma Attorney General  
Attention: Tobacco Enforcement  
313 N.E. 21<sup>st</sup> Street  
Oklahoma City, Oklahoma 73105

**Line 9: Signature**

**This Certificate of Compliance must also be signed and dated by an authorized Notary Public.**

Under penalty of perjury, I state that, to the best of my knowledge, all of the information contained in this Yearly Certificate of Compliance is true and correct, and that I am an officer authorized to legally bind the above-named company either under the laws of the State of Oklahoma or of the jurisdiction where the manufacturer resides or is organized.

Name of Authorized Agent:  Title:

Signature of Authorized Agent:  Date:

STATE OF \_\_\_\_\_)

COUNTY OF \_\_\_\_\_)

COUNTRY OF \_\_\_\_\_)

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared \_\_\_\_\_, personally known to me (or proved to be on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the instrument and acknowledge to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
My Commission Expires

This notarized Certificate of Compliance, together with Proof of Deposit, must be received at the address below by April 15, 2025. OTC Rule 710:70-9-4.

Office of the Oklahoma Attorney General  
Attention: Tobacco Enforcement  
313 N.E. 21<sup>st</sup> Street  
Oklahoma City, Oklahoma 73105

***You must sign and mail the original form to the address above.***