



CERTIFICATION OF COMPLIANCE AND AFFIDAVIT BY NON-PARTICIPATING TOBACCO PRODUCT MANUFACTURER JUS-TOB3 (Rev. 09/2020 11/2021)

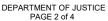
PART 1: NON-PARTICIPATING MANUFACTURER ("NPM")

Name:
Telephone Number:
Email Address:
Address:

PART 2: ESCROW DEPOSITED FOR THE BENEFIT OF CALIFORNIA

U
ur-
are
R
v
oy
for
<u> </u>

Attach documentation from the Escrow Agent, as defined by Title 11, California Code of <u>Regulations Section 999.10(b)(9)</u>, confirming the deposit of qualified escrow principal <u>Qualified</u> <u>Escrow Principal</u>.





CERTIFICATION OF COMPLIANCE AND AFFIDAVIT BY NON-PARTICIPATING TOBACCO PRODUCT MANUFACTURER JUS-TOB3 (Rev. 09/2020 11/2021)

PART 3: ESCROW AGENT

NPM last executed California's Approved Tobacco Escrow Agree	ement o	n or al	bout				
("Execution Date"	'). (If the	e first p	bage and	l the			
signature page(s) of the Approved Tobacco Escrow Agreement of	do not m	atch,	Applican	nt shall			
use the date on the first page of its Approved Tobacco Escrow Agreement.) Since the Execution							
Date, has NPM or any other Pperson modified or amended any t	erms or	condi	tions in				
California's Approved Tobacco Escrow Agreement?	Yes		No				

Name of Financial Institution:
Escrow Agent:
Telephone Number:
Email Address:
Mailing Address:
Escrow Account Number:
California Sub-Account Number(s):

PART 4: MINIMUM ESCROW PRINCIPAL ON DEPOSIT FOR THE BENEFIT OF CALIFORNIA

Pursuant to the terms and conditions in the Approved Tobacco Escrow Agreement that (NPM Name) executed on or about the Execution Date above, after making the deposit of Qualified Escrow Principal addressed by this certification, the Minimum Qualified Escrow Fund Principal On-Deposit for the benefit of California, as defined by at least Sections 2.H, 2.K, 2.R, 2.U of the Approved Tobacco Escrow Agreement, is now______.

PART 5: STATUS OF NPM'S MOST RECENT NON-PARTICIPATING MANUFACTURER CERTIFICATION SEEKING LISTING ON THE CALIFORNIA TOBACCO DIRECTORY (JUS-TOB5)

After carefully reviewing the most recent NON-PARTICIPATING MANUFACTURER CERTIFICATION SEEKING LISTING ON THE CALIFORNIA TOBACCO DIRECTORY (JUS-TOB5) submitted by NPM, I have determined that all the information therein is still current, complete, and accurate, and NPM is not otherwise required to file a supplemental JUS-TOB5 under Title 11, California Code of Regulations Section 999.17.

Yes 🛛 No 🗆

STATE OF CALIFORNIA



CERTIFICATION OF COMPLIANCE AND AFFIDAVIT BY NON-PARTICIPATING TOBACCO PRODUCT MANUFACTURER JUS-TOB3 (Rev. 09/2020 11/2021)

If you answered "No," file a supplemental JUS-TOB5 pursuant to Title 11, California Code of Regulations Section 999.17.

Submit this form to Office of the Attorney General, Tobacco Unit, 1300 I Street, Suite 125, Sacramento, CA 95814.

Deposit Type	Escrow Deposit Deadline	This Form and CIG-
		Sales JUS-TOB4
		Submitted by
First Quarter (Jan-Mar)	April 21	April 30
Second Quarter (Apr-Jun)	July 21	July 30
Third Quarter (July-Sept)	October 21	October 30
Fourth Quarter (Oct-Dec)	January 21	January 30
Supplemental(s)	Within fifteen (15) days after	Nine (9) days after the
	NPM determines that additional	supplemental deposit
	escrow must be deposited under	
	Health and Safety Code sections	
	104555-104557 or by the date	
	required by California, whichever	
	occurs first.	

PART SIX: SIGNATURES

<u>NPM</u>

SIGNATURE OF AUTHORIZED AGENT FOR NPM: _____

NAME OF AUTHORIZED AGENT FOR NPM: _____

TITLE: _____

DATE: _____

To be completed by a notary public

A notary public verifies only the identity of the individual who signed the document to which this certificate is attached, not the truthfulness, accuracy, or validity of that document.

On	, before me,	
personally appeared		

STATE OF CALIFORNIA



CERTIFICATION OF COMPLIANCE AND AFFIDAVIT BY NON-PARTICIPATING TOBACCO PRODUCT MANUFACTURER JUS-TOB3 (Rev. 09/2020 11/2021)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged 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.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature: ____

(Seal)