State of Illinois
Non-Participating Manufacturer's
Sales Information

Escrow-S

Manufacturer Identification

Company Name	Date

Mailing Address			

City	State	Zip Code	Country

Phone	Fax

Name and title of person completing this form

Mail-to Address   (if different from above)

Name

Mailing Address

City	State	Zip Code	Country

Phone	Fax	E-Mail

Liability Year

☐ **2026**   ☐ Other:

Manufacturer's Records   (Attach Addendum pages as necessary)

Instructions for the Manufacturer: List each distributor which sells your product(s) in the State of Illinois. For each distributor, provide the sales volume according to your records for each brand family for the liability year and provide copies of invoices or other documents that support the sales volume listed. In addition, provide the name, address and contact person for all distributors to whom you sold product for the liability year. You must retain all invoices and documentation of sales and other information relied upon for a period of 5 years, unless otherwise required by law to maintain them for a greater period of time.

By completion of this form, the Manufacturer identified above requests that the Attorney General:

- identify distributors, in addition to those the manufacturer has listed below, which have reported the sale of manufacturer's brands in Illinois during the liability year
- compare the brand sales volume below to that which distributors have reported to the Attorney General
- determine whether an escrow payment based on the manufacturer's reported sales volume represents adequate funding for the liability year

Distributor	Brand Family	Check One	Sales Volume	
			Manufacturer's Records	**Distributors Reported as of: _____** (AG Use Only)
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		Total of RYO Ounces		
		Total of Cigarette Sticks		

Rev. 12/08/2025

State of Illinois
Non-Participating Manufacturer's Sales Information

Manufacturer Identification				
Company Name			Sales Addendum Page ____ of ____	

Distributor	Brand Family	Check One	Sales Volume	
			Manufacturer's Records	**Distributors Reported as of: _____** (AG Use Only)
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
		☐ Cigarette ☐ RYO		
Total of RYO Ounces				
Total of Cigarette Sticks				

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