

**AFFIDAVIT**

I hereby certify that as of \_\_\_\_\_, 20\_\_\_\_, all \_\_\_\_\_'s cigarette products listed on this certification form are lawful for marketing under the Family Smoking Prevention and Tobacco Control Act. Such products are either grandfathered, provisionally approved during the review process or authorized by the Food and Drug Administration to be able to be sold in the United States.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Address  
\_\_\_\_\_

Subscribed and sworn to me on the \_\_\_\_\_ day of \_\_\_\_\_, 2019 by \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me. Witness by my hand and official seal.

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

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