

Sales of Tobacco Products

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Return for month of: ______ Year: _____ Name: _____

List tobacco products sold other than little cigars or snuff. Only include cigars if all cigars are taxed at 50%. Include all information required in the table for tobacco products sold. If more space is needed, include additional copies of Schedule S1.

Invoice number	Invoice date	Customer: Name, City, and State	Wholesale sales price

Wholesale sales price total (enter this total on line 1 of Form 70-026)

Include with Iowa Tobacco Product Monthly Return for Out-of-State Distributors, Form 70-026