<b></b> lowa	Department of	
REV	<b>VÉNUE</b>	

## Iowa Tobacco Products Out-of-State Distributors Schedule S2

tax.iowa.go					
		e:	Year: Nar	h of:	eturn for month
sold. List only one entry for sales of the same brai	st only one e	-	all information required in the table for space is needed, include additional copies		
Weight of Total weight of Quantity each (in quantity x ounces)	Quantity	Brand name(s)	Customer: Name, City and State	Invoice date	Invoice number
		•	(enter this total on line 4 of Form 70-0	•	•

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