

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

List tobacco products purchased or returned from out-of-state 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 purchased or returned from out of state. If more space is needed, include additional copies of Schedule P1.

Invoice number	Invoice date	Seller: Name, City, and State	Returned from out-of-state customer: Name, City, and State	Wholesale sales price

Wholesale sales price total (enter this total on line 1 of Form 70-022)

Include with Iowa Tobacco Products Monthly Tax Return for In-State Distributors, Form 70-022