



### Excise Duty Return Tobacco Dealer

|                 |             |
|-----------------|-------------|
| Business name   |             |
|                 |             |
| Mailing address |             |
|                 |             |
| City            |             |
| Province        | Postal code |

Send this completed return to:

Canada Revenue Agency  
 Prince Edward Island Tax Centre  
 275 Pope Road  
 Summerside PE C1N 6E7

|   |                |
|---|----------------|
| 1 | Account number |
|   |                |
|   | R D            |

|      |                           |
|------|---------------------------|
| 2    | Period covered (YYYYMMDD) |
| From | To                        |
|      |                           |

|   |                               |
|---|-------------------------------|
| 3 | Due date of return (YYYYMMDD) |
|   |                               |

Raw leaf tobacco (kilograms)

**Opening inventory** ►  A)

**Additions to inventory**

|                             |  |
|-----------------------------|--|
| Domestic shipments received |  |
| Imported shipments received |  |

**Total additions** ►  B)

**Reductions to inventory**

|                    |  |
|--------------------|--|
| Domestic shipments |  |
| Exported shipments |  |

**Total reductions** ►  C)

**Inventory adjustments (+ or -)** ►  D)

**Closing inventory (A + B) - C ± D** ►  E)

**Certification**

|  |                          |                           |               |
|--|--------------------------|---------------------------|---------------|
| I, _____   |                          |                           |               |
| Print name   |                          | Position or office        |               |
| certify that the information in this return is, to the best of my knowledge, correct and complete. |                          |                           |               |
| _____<br>Signature   | _____<br>Date (YYYYMMDD) | _____<br>Telephone number | _____<br>Ext. |

Note: The Canada Revenue Agency needs your consent to communicate with a representative about your business account. To authorize a representative to receive or update your confidential information by phone or mail, use Form AUT 01, Authorise a Representative for Access by Phone and Mail. You can get this form at [canada.ca/cra-forms](http://canada.ca/cra-forms). To give online access to your account, go to My Business Account and select "Manage authorized representatives."

Personal information is collected for purposes of the administration or enforcement of the Excise Tax Act, 2001 and related programs and activities such as administering tax, rebates, elections, audit, compliance, and collection. Personal information may be shared for the purposes of other federal Acts that provide for the imposition and collection of a tax or duty. Personal information may also be shared with other federal, provincial, territorial or foreign government institutions to the extent authorized by law. Failure to provide this information may result in interest payable, penalties or other actions. Under the Privacy Act, individuals have the right to access their personal information, request correction, or file a complaint to the Privacy Commissioner of Canada regarding the handling of the individual's personal information. Refer to Personal Information Bank CRA PPU 224 at [canada.ca/cra-info-source](http://canada.ca/cra-info-source).

Form prescribed by the Minister of National Revenue

