

CERTIFICATE OF COMPLIANCE

AFFIDAVIT OF UNITS SOLD and ESCROW DEPOSITED FOR GEORGIA IN 2024

Under penalty of perjury, I _____ (name) hereby certify that I have knowledge of the information contained herein and in the information submitted to the Attorney General as part of the online **TOBACCO PRODUCT MANUFACTURER’S CERTIFICATION FOR NON-PARTICIPATING MANUFACTURERS FOR 2024** of _____ (name of Tobacco Product Manufacturer).

I certify that I am the _____ (office, position, or title) of the Tobacco Product Manufacturer.

I certify that I have the authority to bind the Tobacco Product Manufacturer in matters relating to the information contained in the **TOBACCO PRODUCT MANUFACTURER’S CERTIFICATION FOR NON-PARTICIPATING MANUFACTURERS FOR 2024**, including information related to the number of units sold in Georgia in 2024 and the amount of escrow deposited for those sales.

I certify that there were _____ units sold by the Tobacco Product Manufacturer in 2024 in Georgia and that the Tobacco Product Manufacturer deposited \$ _____ into escrow as a result of these sales.

Under penalty of perjury, I state that the information contained in this Affidavit is true and accurate.

Designee (Print name): _____

Title: _____

Signature of Designee: _____

Date: _____

Subscribed and sworn to before me on this date: _____

Signature of Notary Public: _____

City or County: _____

My Commission expires: _____