2004-7-6

BRITISH COLUMBIA

Ministry of
Provincial Revenue
Consumer Taxation Branch
www.rev.gov.bc.ca/ctb

SCHEDULE OF SALES OF TAX-EXEMPT TOBACCO TO REGISTERED INDIANS OR INDIAN BANDS

Freedom of Information and Protection of Privacy Act (FIPPA)
The personal information requested is collected under the authority of and used for the purpose of administering the *Tobacco Tax Act*. Questions about how the *FIPPA* applies to this personal information can be directed to the general inquiry line at 604 660-4524 in Vancouver, or toll-free at 1 877 388-4440 elsewhere in Canada, or in writing to Revenue Programs Division, Suite 800 - 360 West Georgia Street, Vancouver BC V6B 6B2.

IMPORTANT: All tax-exempt sales made during each month must be recorded on this schedule and the schedule attached to the monthly tax return form for that period. In allowing an exemption, it is the responsibility of the seller to be satisfied that the claim is legitimate and that all requirements for the exemption are fulfilled.

If you have any questions about this form or how the *Tobacco Tax Act* applies, please call 250 356-1399 or your local Consumer Taxation Branch office.

DEALER'S BUSINESS NAME	PHONE NO. ( )	NAME OF RESERVE ON WHICH RETAIL OUTLET IS LOCATED
DEALER'S ADDRESS	POSTAL CODE	SCHEDULE OF SALES FOR YYYY MM / PERMIT NO.

DATE YYYY MM DD	CUSTOMER'S SIGNATURE	PRINT CUSTOMER'S NAME	BAND NAME AND NO. OR REGISTRY NO. (PRINT IN FULL)	CIGARETTES NO. OF PACKS 15s	20s	25s	NO. CARTONS 150s	200s	CIGARS NO.	PRICE/ CIGAR	LOOSE TOBACCO TOTAL GRAMS SOLD
TOTAL EXEMPT SALES (THIS PAGE)									Do Not Total Cigars		
TOTAL CARRIED OVER (PREVIOUS PAGE)											
TOTAL EXEMPT SALES											

CERTIFICATION – I hereby certify that the details shown above are true and correct.

DEALER'S SIGNATURE	PRINT DEALER'S NAME	DATE SIGNED YYYY MM DD	PAGE NO. _____	DOCUMENT CONTROL NO.

FIN 361 Rev. 2004/7/6

DATE (YYYY MM DD)	CUSTOMER'S SIGNATURE	PRINT CUSTOMER'S NAME	BAND NAME AND NO. OR REGISTRY NO. (PRINT IN FULL)	CIGARETTES NO. OF PACKS 15s	20s	25s	NO. CARTONS 150s	200s	CIGARS NO.	PRICE/ CIGAR	LOOSE TOBACCO TOTAL GRAMS SOLD
TOTAL EXEMPT SALES (THIS PAGE)									Do Not Total Cigars		
TOTAL CARRIED OVER (PREVIOUS PAGE)											
TOTAL EXEMPT SALES											

FIN 351(Reverse) Rev. 2004/7/6

DOCUMENT CONTROL NO.

2005-3-7

BRITISH COLUMBIA

Ministry of
Provincial Revenue
Consumer Taxation Programs Branch
www.rev.gov.bc.ca/ctb

SCHEDULE OF SALES OF TAX-EXEMPT TOBACCO TO REGISTERED INDIANS OR INDIAN BANDS

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DEALER'S BUSINESS NAME | PHONE NO. ( ) | NAME OF RESERVE ON WHICH RETAIL OUTLET IS LOCATED

DEALER'S ADDRESS | POSTAL CODE | SCHEDULE OF SALES FOR YYYY MM | PERMIT NO.

DATE YYYY MM DD	CUSTOMER'S SIGNATURE	PRINT CUSTOMER'S NAME	BAND NAME AND NO. OR REGISTRY NO. (PRINT IN FULL)	CIGARETTES NO. OF PACKS 15s	20s	25s	NO. CARTONS 150s	200s	CIGARS NO.	PRICE/ CIGAR	LOOSE TOBACCO TOTAL GRAMS SOLD
TOTAL EXEMPT SALES (THIS PAGE)									Do Not Total Cigars		
TOTAL CARRIED OVER (PREVIOUS PAGE)											
TOTAL EXEMPT SALES											

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DEALER'S SIGNATURE | PRINT DEALER'S NAME | DATE SIGNED YYYY MM DD | PAGE NO. _____ | DOCUMENT CONTROL NO.

FIN 361 Rev. 2005/3/7

PDF OF ARTWORK

DATE YYYY MM DD	CUSTOMER'S SIGNATURE	PRINT CUSTOMER'S NAME	BAND NAME AND NO. OR REGISTRY NO. (PRINT IN FULL)	CIGARETTES NO. OF PACKS			CIGARETTES NO. CARTONS		CIGARS		LOOSE TOBACCO
				15s	20s	25s	150s	200s	NO.	PRICE/ CIGAR	TOTAL GRAMS SOLD
TOTAL EXEMPT SALES (THIS PAGE)									Do Not Total Cigars		
TOTAL CARRIED OVER (PREVIOUS PAGE)											
TOTAL EXEMPT SALES											

FIN 361(Reverse) Rev. 2005/3/7

DOCUMENT CONTROL NO.

2005-6-30

BRITISH COLUMBIA

Ministry of Small Business and Revenue
Consumer Taxation Programs Branch
www.rev.gov.bc.ca/ctb

SCHEDULE OF SALES OF TAX-EXEMPT TOBACCO TO REGISTERED INDIANS OR INDIAN BANDS

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DEALER'S BUSINESS NAME | PHONE NO. ( ) | NAME OF RESERVE ON WHICH RETAIL OUTLET IS LOCATED

DEALER'S ADDRESS | POSTAL CODE | SCHEDULE OF SALES FOR YYYY MM | PERMIT NO.

DATE YYYY MM DD	CUSTOMER'S SIGNATURE	PRINT CUSTOMER'S NAME	BAND NAME AND NO. OR REGISTRY NO. (PRINT IN FULL)	CIGARETTES NO. OF PACKS 15s	20s	25s	NO. CARTONS 150s	200s	CIGARS NO.	PRICE/ CIGAR	LOOSE TOBACCO TOTAL GRAMS SOLD
TOTAL EXEMPT SALES (THIS PAGE)									Do Not Total Cigars		
TOTAL CARRIED OVER (PREVIOUS PAGE)											
TOTAL EXEMPT SALES											

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DEALER'S SIGNATURE | PRINT DEALER'S NAME | DATE SIGNED YYYY MM DD | PAGE NO. _____ | DOCUMENT CONTROL NO.

FIN 361 Rev. 2005/6/30

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DATE YYYY MM DD	CUSTOMER'S SIGNATURE	PRINT CUSTOMER'S NAME	BAND NAME AND NO. OR REGISTRY NO. (PRINT IN FULL)	CIGARETTES NO. OF PACKS 15s	20s	25s	NO. CARTONS 150s	200s	CIGARS NO.	PRICE/ CIGAR	LOOSE TOBACCO TOTAL GRAMS SOLD
TOTAL EXEMPT SALES (THIS PAGE)									Do Not Total Cigars		
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FIN361(Reverse) Rev. 2005/6/30

DOCUMENT CONTROL NO.

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2006-5-5

BRITISH COLUMBIA

Ministry of Small Business and Revenue
www.sbr.gov.bc.ca/ctb

Mailing Address:
PO Box 9442 Stn Prov Govt
Victoria BC V8W 9V4

SCHEDULE OF SALES OF TAX-EXEMPT TOBACCO TO REGISTERED INDIANS OR INDIAN BANDS

IMPORTANT: All tax-exempt sales made during each month must be recorded on this schedule and the schedule attached to the monthly tax return form for that period. In allowing an exemption, it is the responsibility of the seller to be satisfied that the claim is legitimate and that all requirements for the exemption are fulfilled.

If you have any questions about this form or how the *Tobacco Tax Act* applies, or to order more schedules, call the Consumer Taxation Branch: 250 387-1856

Or, E-mail your request to: tobaccotax@gov.bc.ca

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DEALER'S BUSINESS NAME | PHONE NO. ( ) | NAME OF RESERVE ON WHICH RETAIL OUTLET IS LOCATED

DEALER'S ADDRESS | POSTAL CODE | SCHEDULE OF SALES FOR YYYY MM | PERMIT NO.

	DATE YYYY MM DD	CUSTOMER'S SIGNATURE	PRINT CUSTOMER'S NAME	INDIAN REGISTRY NO. (10 DIGIT NO.)	CIGARETTES NO. OF PACKS 20s	25s	NO. OF CARTONS 200s	LOOSE TOBACCO TOTAL GRAMS SOLD	CIGARS NO.	PRICE/ CIGAR
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CERTIFICATION – I hereby certify that the details shown above are true and correct.

DEALER'S SIGNATURE | PRINT DEALER'S NAME | DATE SIGNED YYYY MM DD | PAGE NO. _____ | DOCUMENT CONTROL NO.

FIN 361 Rev. 2008/5/5

	DATE YYYY MM DD	CUSTOMER'S SIGNATURE	PRINT CUSTOMER'S NAME	INDIAN REGISTRY NO. (10 DIGIT NO.)	CIGARETTES NO. OF PACKS 20s	25s	NO. OF CARTONS 200s	LOOSE TOBACCO TOTAL GRAMS SOLD	CIGARS NO.	PRICE/ CIGAR
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FIN 361(Reverse) Rev. 2008 / 5 / 5

DOCUMENT CONTROL NO.

2007-9-7

BRITISH COLUMBIA
The Best Place on Earth

Ministry of
Small Business
and Revenue

Mailing Address:
PO Box 9442 Stn Prov Govt
Victoria BC V8W 9V4
www.sbr.gov.bc.ca/ctb

SCHEDULE OF SALES OF TAX-EXEMPT TOBACCO TO REGISTERED INDIANS OR INDIAN BANDS

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DEALER'S BUSINESS NAME | PHONE NO ( ) | NAME OF RESERVE ON WHICH RETAIL OUTLET IS LOCATED

DEALER'S ADDRESS | POSTAL CODE | SCHEDULE OF SALES FOR YYYY MM | PERMIT NO.

	DATE YYYY MM DD	CUSTOMER'S SIGNATURE	PRINT CUSTOMER'S NAME	INDIAN REGISTRY NO. (10 DIGIT NO.)	CIGARETTES NO. OF PACKS 20s	25s	NO. OF CARTONS 200s	LOOSE TOBACCO TOTAL GRAMS SOLD	CIGARS NO.	PRICE/ CIGAR
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CERTIFICATION – I hereby certify that the details shown above are true and correct.

DEALER'S SIGNATURE | PRINT DEALER'S NAME | DATE SIGNED YYYY MM DD | PAGE NO. | DOCUMENT CONTROL NO. 850451

FIN 361 Rev. 2007/9/7

	DATE YYYY MM DD	CUSTOMER'S SIGNATURE	PRINT CUSTOMER'S NAME	INDIAN REGISTRY NO. (10 DIGIT NO.)	CIGARETTES NO. OF PACKS 20s	25s	NO. OF CARTONS 200s	LOOSE TOBACCO TOTAL GRAMS SOLD	CIGARS NO.	PRICE/ CIGAR
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				TOTAL EXEMPT SALES						

FIN 967 (Revised) Rev. 2007-5-17

DOCUMENT CONTROL NO.
850451

2009-1-22

BRITISH COLUMBIA
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Ministry of Finance

Mailing Address:
PO Box 9442 Stn Prov Govt
Victoria BC V8W 9V4
www.sbr.gov.bc.ca/ctb

SCHEDULE OF SALES OF TAX-EXEMPT TOBACCO TO REGISTERED INDIANS OR INDIAN BANDS

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DEALER'S BUSINESS NAME | PHONE NO. ( ) | NAME OF RESERVE ON WHICH RETAIL OUTLET IS LOCATED

DEALER'S ADDRESS | POSTAL CODE | SCHEDULE OF SALES FOR YYYY MM | PERMIT NO.

	DATE YYYY MM DD	CUSTOMER'S SIGNATURE	PRINT CUSTOMER'S NAME	INDIAN REGISTRY NO. (10 DIGIT NO.)	CIGARETTES NO. OF PACKS 20s	CIGARETTES NO. OF PACKS 25s	CIGARETTES NO. OF CARTONS 200s	LOOSE TOBACCO TOTAL GRAMS SOLD	CIGARS NO.	CIGARS PRICE/ CIGAR
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DEALER'S SIGNATURE | PRINT DEALER'S NAME | DATE SIGNED YYYY MM DD | PAGE NO. _____ | DOCUMENT CONTROL NO.

FIN 361 Rev. 2009 / 1 / 22

	DATE YYYY MM DD	CUSTOMER'S SIGNATURE	PRINT CUSTOMER'S NAME	INDIAN REGISTRY NO. (10 DIGIT NO.)	CIGARETTES NO. OF PACKS 20s	25s	NO. OF CARTONS 200s	LOOSE TOBACCO TOTAL GRAMS SOLD	CIGARS NO.	PRICE/ CIGAR
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				TOTAL EXEMPT SALES (THIS PAGE)					Do Not Total Cigars	
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				TOTAL EXEMPT SALES						

FIN 361(Reverse) Rev. 2009 / 1 / 22

DOCUMENT CONTROL NO.

2011-5-2

BRITISH COLUMBIA | Ministry of Finance

Mailing Address:
PO Box 9442 Stn Prov Govt
Victoria BC V8W 9V4
www.sbr.gov.bc.ca/ctb

SCHEDULE OF SALES OF TAX-EXEMPT TOBACCO TO REGISTERED INDIANS OR INDIAN BANDS

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DEALER'S BUSINESS NAME | PHONE NUMBER ( ) | NAME OF RESERVE ON WHICH RETAIL OUTLET IS LOCATED

DEALER'S ADDRESS | POSTAL CODE | SCHEDULE OF SALES FOR YYYY MM | PERMIT NUMBER

	DATE YYYY MM DD	CUSTOMER'S SIGNATURE	PRINT CUSTOMER'S NAME	INDIAN REGISTRY NUMBER (10 DIGIT NUMBER)	CIGARETTES NO. OF PACKS 20s	CIGARETTES NO. OF PACKS 25s	CIGARETTES NO. OF CARTONS 200s	LOOSE TOBACCO TOTAL GRAMS SOLD	CIGARS NO.	CIGARS PRICE/ CIGAR
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DEALER'S SIGNATURE | PRINT DEALER'S NAME | DATE SIGNED YYYY MM DD | PAGE NO. _____ | DOCUMENT CONTROL NO.

FIN 361 Rev. 2011 / 5 / 2

	DATE YYYY MM DD	CUSTOMER'S SIGNATURE	PRINT CUSTOMER'S NAME	INDIAN REGISTRY NUMBER (10 DIGIT NUMBER)	CIGARETTES NO. OF PACKS 20s	CIGARETTES NO. OF PACKS 25s	CIGARETTES NO. OF CARTONS 200s	LOOSE TOBACCO TOTAL GRAMS SOLD	CIGARS NO.	CIGARS PRICE/ CIGAR
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				TOTAL EXEMPT SALES (THIS PAGE)						Do Not Total Cigars
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				TOTAL EXEMPT SALES						

FIN 361(Reverse) Rev. 2011 / 5 / 2

DOCUMENT CONTROL NO.

2012-7-10

BRITISH COLUMBIA | Ministry of Finance

Mailing Address:
PO Box 9442 Stn Prov Govt
Victoria BC V8W 9V4
www.sbr.gov.bc.ca/ctb

SCHEDULE OF SALES OF TAX-EXEMPT TOBACCO TO REGISTERED INDIANS OR INDIAN BANDS

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DEALER'S BUSINESS NAME | PHONE NUMBER ( ) | NAME OF RESERVE ON WHICH RETAIL OUTLET IS LOCATED

DEALER'S ADDRESS | POSTAL CODE | SCHEDULE OF SALES FOR YYYY MM | PERMIT NUMBER

	DATE YYYY MM DD	CUSTOMER'S SIGNATURE	CUSTOMER'S NAME (*please print*)	INDIAN REGISTRY NUMBER (10 DIGIT NUMBER)	CIGARETTES NO. OF PACKS 20s	CIGARETTES NO. OF PACKS 25s	CIGARETTES NO. OF CARTONS 200s	LOOSE TOBACCO TOTAL GRAMS SOLD	CIGARS NO.	CIGARS PRICE/ CIGAR
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			TOTAL EXEMPT SALES (THIS PAGE)							Do Not Total Cigars
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			TOTAL EXEMPT SALES							

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DEALER'S SIGNATURE | DEALER'S NAME (*please print*) | DATE SIGNED YYYY MM DD | PAGE NO. _____ | DOCUMENT CONTROL NO.

FIN 351 Rev. 2012/7/10

	DATE YYYY MM DD	CUSTOMER'S SIGNATURE	CUSTOMER'S NAME (*please print*)	INDIAN REGISTRY NUMBER (10 DIGIT NUMBER)	CIGARETTES NO. OF PACKS 20s	CIGARETTES NO. OF PACKS 25s	CIGARETTES NO. OF CARTONS 200s	LOOSE TOBACCO TOTAL GRAMS SOLD	CIGARS NO.	CIGARS PRICE/ CIGAR
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				TOTAL EXEMPT SALES (THIS PAGE)					Do Not Total Cigars	
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				TOTAL EXEMPT SALES						

FIN 361(Reverse) Rev. 2012 / 7 / 10

DOCUMENT CONTROL NO.

2015-10-6

BRITISH COLUMBIA | Ministry of Finance

Mailing Address:
PO Box 9442 Stn Prov Govt
Victoria BC V8W 9V4
gov.bc.ca/salestaxes

SCHEDULE OF SALES OF TAX-EXEMPT TOBACCO TO FIRST NATIONS

IMPORTANT: All tax-exempt sales made during each month must be recorded on this schedule and the schedule attached to the monthly tax return for that period. In allowing an exemption, it is the responsibility of the seller to be satisfied that the claim is legitimate and that all requirements for the exemption are fulfilled.

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DEALER'S BUSINESS NAME	TELEPHONE NUMBER ( )	FIRST NATION LAND ON WHICH RETAIL OUTLET IS LOCATED
DEALER'S ADDRESS (*include street or PO box, city, province*)	POSTAL CODE	SCHEDULE OF SALES FOR YYYY MM / PERMIT NUMBER

	DATE YYYY MM DD	CUSTOMER'S SIGNATURE	CUSTOMER'S NAME (*please print*)	*CERTIFICATE OF INDIAN STATUS* REGISTRY NUMBER (10 DIGIT NUMBER)	CIGARETTES NO. OF PACKS 20s	25s	NO. OF CARTONS 200s	LOOSE TOBACCO TOTAL GRAMS SOLD	CIGARS NO.	PRICE/ CIGAR
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										
11.										
12.										
13.										
14.										
				TOTAL EXEMPT SALES (THIS PAGE)					Do Not Total Cigars	
				TOTAL CARRIED OVER (PREVIOUS PAGE)						
				TOTAL EXEMPT SALES						

CERTIFICATION – I hereby certify that the details shown above are true and correct.

DEALER'S SIGNATURE	DEALER'S NAME (*please print*)	DATE SIGNED YYYY MM DD	PAGE NO. _____	DOCUMENT CONTROL NO.

FIN 361 Rev. 2015 / 10 / 6

	DATE YYYY MM DD	CUSTOMER'S SIGNATURE	CUSTOMER'S NAME (*please print*)	*CERTIFICATE OF INDIAN STATUS* REGISTRY NUMBER (10 DIGIT NUMBER)	CIGARETTES NO. OF PACKS 20s	25s	NO. OF CARTONS 200s	LOOSE TOBACCO TOTAL GRAMS SOLD	CIGARS NO.	PRICE/ CIGAR
15.										
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				TOTAL EXEMPT SALES (THIS PAGE)						Do Not Total Cigars
				TOTAL CARRIED OVER (PREVIOUS PAGE)						
				TOTAL EXEMPT SALES						

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2016-7-4.

BRITISH COLUMBIA | Ministry of Finance

Mailing Address:
PO Box 9442 Stn Prov Govt
Victoria BC V8W 9V4
gov.bc.ca/salestaxes

SCHEDULE OF EXEMPT TOBACCO SALES

IMPORTANT: All tax-exempt sales made to eligible First Nations during each month must be recorded on this schedule and the schedule attached to the monthly tax return for that period. In allowing an exemption, it is the responsibility of the seller to be satisfied that the claim is legitimate and that all requirements for the exemption are fulfilled.

If you have any questions about this form or how the *Tobacco Tax Act* applies, or **to order more schedules,** call the Consumer Taxation Programs Branch at 250 387-9115.

Or email your request to: **tobaccotax@gov.bc.ca**

Freedom of Information and Protection of Privacy Act (FOIPPA)
The personal information on this form is collected for the purpose of administering the *Tobacco Tax Act* under the authority of both this Act and section 26(a) of the FOIPPA. Questions about the collection or use of this information can be directed to the Director, Policy, Rulings and Services, PO Box 9442 Stn Prov Govt, Victoria, BC V8W 9V4 (telephone: toll-free at 1 877 388-4440).

DEALER'S BUSINESS NAME | TELEPHONE NUMBER ( ) | FIRST NATION LAND ON WHICH RETAIL OUTLET IS LOCATED

DEALER'S ADDRESS (*include street or PO box, city and province*) | POSTAL CODE | SCHEDULE OF SALES FOR YYYY MM | PERMIT NUMBER

	DATE YYYY MM DD	CUSTOMER'S SIGNATURE	CUSTOMER'S NAME (*print individual's name or if purchasing for band, print band name*)	*CERTIFICATE OF INDIAN STATUS* REGISTRY NUMBER (*10 digit number for individual, or 3 digit band number for band purchases*)	CIGARETTES NO. OF PACKS 20s	25s	NO. OF CARTONS 200s	LOOSE TOBACCO TOTAL GRAMS SOLD	CIGARS NO.	PRICE/ CIGAR
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11.										
12.										
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14.										
				TOTAL EXEMPT SALES (THIS PAGE)					Do Not Total Cigars	
				TOTAL CARRIED OVER (PREVIOUS PAGE)						
				TOTAL EXEMPT SALES						

CERTIFICATION – I hereby certify that the details shown above are true and correct.
DEALER'S SIGNATURE

X

DEALER'S NAME (*please print*) | DATE SIGNED YYYY MM DD | PAGE NO. _____ | DOCUMENT CONTROL NO.

FIN 361 Rev. 2016 / 7 / 4

	DATE YYYY MM DD	CUSTOMER'S SIGNATURE	CUSTOMER'S NAME (*print individual's name or if purchasing for band, print band name*)	*CERTIFICATE OF INDIAN STATUS* REGISTRY NUMBER (*10 digit number for individual, or 3 digit band number for band purchases*)	CIGARETTES NO. OF PACKS 20s	CIGARETTES NO. OF PACKS 25s	CIGARETTES NO. OF CARTONS 200s	LOOSE TOBACCO TOTAL GRAMS SOLD	CIGARS NO.	CIGARS PRICE/ CIGAR
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36.										
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38.										
				TOTAL EXEMPT SALES (THIS PAGE)						Do Not Total Cigars
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				TOTAL EXEMPT SALES						

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