Ohio Department of Taxation
P.O. Box 530
Columbus, OH 43216-0530

Reset Form

OTP LC5
Rev. 10/13

Little Cigars Schedule C-LC
(Use additional pages if necessary)

Name of reporting in-state licensed distributor _____ Account number _____

Little Cigars Returned to the Manufacturer

For the period of _____

Page _____ of _____

Returned Date	Credit Memo Number	Quantity	Product Description	Manufacturer	Wholesale Cost