



# Schedule OR-C, Cigarette Distribution Report

File with your Form OR-511-IN or OR-511-OUT



Cigarettes shipped to: \_\_\_\_\_

**Out-of-state** distributor (sales into Oregon).  **In-state** distributor [shipments of cigarettes out of Oregon jurisdiction; for example: (1) shipments out of state, (2) returns to suppliers, (3) sales to federal military installations].

Distributor \_\_\_\_\_ License number \_\_\_\_\_ Quarter ending \_\_\_\_\_

Date of sale	List all cigarette distributions Name and address of purchaser	Invoice number	Column A 20-pack			Column B 25-pack		
			Non-Oregon stamped	Unstamped	Total	Non-Oregon stamped	Unstamped	Total

Attach additional schedules if needed. **Keep a copy of each schedule for your records.**

**20-pack Totals** \_\_\_\_\_ **25-pack Totals** \_\_\_\_\_

In-state distributors carry totals to Form OR-511-IN, part 1, line 6.  
Out-of-state distributors carry totals to Form OR-511-OUT, part 1, line 1.