

| SARS EXCISE ACCOUNT  |        | TOBACCO PRODUCTS<br>(VM) - MANUFACTURING WAREHOUSE |                    |           |           |           |           |               |           |           |           | DA 260                  |           |           |           |           |           |           |           |           |           |  |  |
|--|--------|--|--------------------|-----------|-----------|-----------|-----------|---------------|-----------|-----------|-----------|-------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|--|--|
| LICENSED WAREHOUSE NAME >>>>   |        |  |                    |           |           |           |           |               |           |           |           | WAREHOUSE NUMBER >>>>   |           |           |           |           |           |           |           |           |           |  |  |
| PHYSICAL ADDRESS >>>>  |        |  |                    |           |           |           |           |               |           |           |           | EXCISE CLIENT CODE >>>> |           |           |           |           |           |           |           |           |           |  |  |
| >>>>   |        |  |                    |           |           |           |           |               |           |           |           | YEAR & MONTH(S) >>>>    |           |           |           |           |           |           |           |           |           |  |  |
| >>>>   |        |  |                    |           |           |           |           |               |           |           |           | FROM DATE >>>>          |           |           |           |           |           |           |           |           |           |  |  |
| >>>>   |        |  |                    |           |           |           |           |               |           |           |           | TO DATE >>>>            |           |           |           |           |           |           |           |           |           |  |  |
| PRODUCT CODE   |        | CTOB   |                    | PTOB      |           | PTOB      |           | CIGS          |           | CGAR      |           | HTOB                    |           | OTOB      |           | ITOB      |           | ITOB      |           | VTOB      |           |  |  |
| TARIFF ITEM(S)   |        | 104.35.05  | 104.35.15          | 104.35.01 | 104.35.02 | 104.35.03 | 104.35.17 | 104.30.07     | 104.30.15 | 104.30.03 | 104.30.11 | 104.35.09               | 104.35.19 | 104.37.05 | 104.37.11 | 104.37.19 | 104.37.07 | 104.37.13 | 104.37.21 | 104.37.14 | 104.37.16 |  |  |
| TARIFF ITEM(S)   |        | KG   |                    | KG NET    |           | KG NET    |           | CIGARETTES    |           | KG NET    |           | KG                      |           | KG        |           | STICKS    |           | KG        |           | ML        |           |  |  |
| STATISTICAL UNIT   |        | KG   |                    | KG NET    |           | KG NET    |           | CIGARETTES    |           | KG NET    |           | KG                      |           | KG        |           | STICKS    |           | KG        |           | ML        |           |  |  |
| Opening Balance  |        |  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| Plus Production  |        | DA 260.01  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| Plus Receipts From C&E Warehouses  |        | DA 260.02  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| Plus Returns Of Duty Paid Stock  |        | DA 260.03  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| = SUBTOTAL   |        |  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| Less Non-Duty Paid Removals  |        | DA 260.04  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| Less Closing Balance   |        |  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| = Total On Which Duty Must Be Paid   |        |  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| DUTY CALCULATION   |        |  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| EXCISE VALUE FOR DUTY PAID REMOVALS (per tariff item)                              |        |  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| TOTAL: EXCISE VALUE FOR DUTY PAID REMOVALS   |        | r  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| DECLARATION  |        |  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| (Name & Surname)   |        | Dutiable DTY                                       |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| NET CAPACITY AS  |        | Rate of Duty                                       |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| FOR (Licensee Name)  |        | Duty Payable                                       |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
|  |        | Overpayment  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
|  |        | Underpayment                                       |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
|  |        | Returns of DP stock                                |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| HEREBY DECLARE THAT ALL INFORMATION SUPPLIED ON THIS DOCUMENT IS TRUE AND CORRECT. |        | GROSS EXCISE DUTY PAYABLE                          |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
|  |        | Less Gross Over-Payment                            |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
|  |        | Less Gross Returns Of Duty Paid Stock              |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
|  |        | SUBTOTAL   |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
|  |        | Plus Gross Under-Payment                           |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| SIGNATURE  |        |  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| DATE   |        |  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| FOR OFFICIAL USE ONLY  |        |  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| CONSOLIDATED DECLARATIONS  |        |  | ASSURANCE ACTIVITY |           | NAME      | SIGNATURE | DATE      | DATE RECEIVED |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| Code   | Number | Date   | Accepted           |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
|  |        |  | Face Checked       |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
|  |        |  | Compliance Checked |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |
| (OFFICIAL DATE STAMP AND SIGNATURE)  |        |  |                    |           |           |           |           |               |           |           |           |                         |           |           |           |           |           |           |           |           |           |  |  |













