SECTION V - PRODUCT LISTING

Section V should be completed for each product listed. (Multiple copies of pages 8 and 9 may be submitted.)

Product Name* (i.e., brand/sub-brand or other commercial name used in commercial distribution - e.g., Acme Lights 100's or Acme Reconstituted Tobacco #202) Anchorage Blue				
2. Product Identification Number (Must be provided if needed to uniquely identify the product) 1234567890				
3. Type of Product Identification Number (Check only one) Item/Catalog Number SKU Number VIPC Number				
4. Intended Use of Product (Check one)*				
5. Consumer Use Product Category (Check applicable, then skip to question 7)* Cigarettes				
6. Further Manufacturing Use Product Category (Check applicable)* Tobacco Paper Additive Silters Other (Specify):				
7. Flavor (Check applicable) Menthol Other (Specify):				
8. If submission is an Update to a Product List (per 905(i)(3)) (previously submitted to FDA) (Make applicable entries) If known, enter the FDA-assigned tracking number (e.g., TP########) for your tobacco product.				
in the military and the state of the state o				
If your product has been introduced to market, discontinued or reintroduced since your last product listing, indicate the most recent change.* $\rm N/A$				
Provide the appropriate date:*				

	sampling of advertising may be re-		
	Pepresentative samples, appropriate states that you provide the following op (.)		
9a. Type of Advertising Material (e.g., magazine ad)	9b. Title	9c. Unique ID or Internal ID Number	9d. Date First Disseminated (mm/dd/yyyy)
Other Media	Spring 2016	ID#: 49203	03/07/2016
that you provide the following	opriately identified, is to be submitted optional information below. You m		
10a. Universal Product Code(s) 00000001	(UPC)		
10b. Type of Labeling Material (e.g., package label)	10c. Title	10d. Unique ID or Internal ID Number	10e. Date First Disseminated (mm/dd/yyyy)
Carton	Carton Packaging	ID#: 89473	01/15/2015
C.2. for additional details. All	nsumer information may be require I consumer information, appropriate ou provide the following optional in .)	ely identified, is to be submi	tted with this form. For
11a. Type of Consumer Information (e.g., consumer brochure)	11b. Title	11c. Unique ID or Internal ID Number	11d. Date First Disseminated (mm/dd/yyyy)