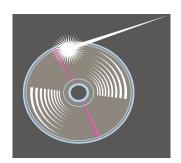
Magnetic Media Filing Formats for Motor Fuel Reporting



Compact Disc



3.5 Diskette

Motor Fuel Compliance Review & Licensing Section 217 782-2291

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FORMAT SPECIFICATIONS FOR PC DISK OR DISKETTE FILING

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Each schedule with its respective layout	8
Total records (Schedule, License, and File)	54

Instructions for Showing Blended Fuel on Receipt Schedules

To show blending you need 2 records. The first is to subtract the fuel, and the second is to add the blended fuel back in. The receipt schedules are "A", "SA", "LA" and "DA".

Enter all of the information exactly as you would normally, with the following exceptions:

1 Filing Indicator, position 26:

Record 1 - Use an "N" to indicated Negative Data to take the fuel out.

Record 2 - Use an "O" to indicate Original Data to add the blended fuel back in.

2 Net Gallons, positions 178 - 187:

Record 1 - Enter gallons to be subtracted.

Record 2 - Enter gallons to be added.

(Use a POSITIVE number in both cases, the Filing Indicator will tell our system whether it should be subtracted or added.)

3 Seller's License Number, positions 94 - 113:

Both records - Use your own License number. Do not leave the field blank or zero fill.

4 Seller's Name, positions 74 - 93:

Record 1 - Enter "XFER TO SCHED M"

Record 2 - Enter "XFER FR SCHED M"

5 Invoice Date, positions 114 - 119:

BOL Date, positions 132 - 137:

Both records - Enter the date of transfer in both fields.

6 Tax Type, position 188:

Both records - Enter a "3" into both fields.

7 Receipt Type, position 199:

Both records - Enter a "1" into both fields.

8 Invoice Number, positions 120 - 131:

BOL Number, positions 138 - 147:

Origin, positions 212 - 226:

Destination, Positions 227 - 241:

Carrier Name, positions 242 - 256:

Both records - You can enter anything you want in these fields except all spaces or all zeroes.

Note: Gallons with Filing Indicator of "N" should be subtracted when accumulating gallons for Schedule total (record "S"), Vendor total (record "V"), and File total (record "Z").

Diskette and Compact Disc (CD) Filing Specifications For Motor Fuel Schedules

- 1 Diskettes used shall be 3.5 HD, or 3.5 and compact disc (in Joliet format).
- 2 Diskette and CD's will **not** be returned.
- 3 External label shall be created per IDOR label format on Page 6, and placed directly on the diskette/CD.
- 4 Data records shall be created per IDOR record layouts described on Pages 8 through 52.
- 5 IDOR permits only one liability period per diskette/CD file.
- 6 All diskettes must contain fixed length records of the length specified on the record layouts. Each record must be terminated by an additional two (2) bytes ASCII record terminator of a Carriage Return and Line Feed (CRLF).
- 7 Recording mode must be IBM standard ASCII.
- **8** All schedules must be entered in filer license number, schedule type order, record type, and purchaser or seller license number order within the schedule type.
- 9 All motor fuel schedules, except for schedules "F" and "J" must be filed on diskette.
- 10 Only supporting schedules for the original return must be filed on diskette or CD. All amended schedule information must be filed on paper.
- 11 Standard Point Location Codes (SPLC) and Standard Carrier Alpha Codes (SCAC) published by The National Motor Freight Traffic Association will **NOT** be utilized.
- 12 Filer's paper schedules must accompany the return for at least two months following magnetic filing approval, unless otherwise notified by IDOR. If no notification is received, paper schedule submission may cease after two liability periods.
- 13 A transmittal sheet must accompany each file showing filer's name and license number, liability period, creation date, and total transactions on the diskette(s), do not save the transmittal to the diskette.
- 14 Records or blocks of data may not span diskettes.
- 15 Use of compression utility PKZIPR is encouraged.
- 16 The filing agent is required to have an updated Form IL-2848, Power of Attorney, for all clients filing through the diskette process.
- 17 The filing agent must sign all transmittal forms as "Agent for Taxpayers" included on the diskette file being submitted.
- 18 IDOR reserves the right to revoke a Motor Fuel License due to non-compliance with requirements or specifications.
- 19 The filing agent must adhere to all IDOR diskette requirements and specifications.
- 20 Do not submit returns and/or remittance with your magnetic media. Continue to send returns to the address indicated on the return form.
- **21** Please send diskette(s) and accompanying documents to:

MOTOR FUEL COMPLIANCE REVIEW AND LICENSING SECTION ILLINOIS DEPARTMENT OF REVENUE PO BOX 19477
SPRINGFIELD IL 62794-9477

Example of Transmittal Which Will Need to Accompany Each File

Illinois Motor Fuel Schedules Diskette Transmittal

Filing Agent Phone: (999) 999-9999

Liability Period: 99/99 Creation Date: 99/99/99

Filer's License: X - 99999

<u>License</u> 09999	Schedule A C	Number of <u>Transactions</u> 99,999 999	MUST APPEAR FOR EACH FILER
	•		
	'S'	5	
	'V'	1	
19999	LA	999	
	'S'	4	
	'V'	1	
			 •
	'Z'	1	
Total Records		999,999	

Reminder: Please put the following information on your external label on the diskette(s)

Your license number Your company name Liability period Creation date

Sequence number, if more than one diskette (example: 1 of 2, 2 of 2, etc.)

Note: Distributor/Supplier and Receiver license numbers are two separate filer license numbers.

Data Records Explanation

- 1 The following explains the types of data records that are to be used when filing on diskette. Each record is a fixed length record of 256 bytes.
 - A Detail record Schedule entry line items. Four different types may be submitted by setting the filing indicator in the record.
 - **1** Original Entry All initial entries filed with the return.
 - 2 Reversal Entry An exact copy of the Original Entry that needs to be corrected.
 - **3** Correction Entry Replaces an entry that was submitted in error.

Note: A Reversal Entry must be submitted that corresponds to this Correction Entry

Negative Entry
 Negates or reduces the balance of an Original Entry, using a different Invoice Number.
 Used when original Invoice Number is not available, however the BOL# should remain

the same as originally reported.

B Schedule Total Record - Accumulated totals for schedule entries of each schedule. Required at the end of

Schedule Entry Records for each schedule written to the file.

C License Total Record - Summary total of all entries from all schedule total records for each licensed filer. Required

at the end of the final schedule total records for each licensed filer.

D File Total Record - Summary total of all entries from all schedules. Required as the last record on the

diskette file.

General Information

- 1 All numeric fields are in unpacked format, preceded with zeroes, right justified and zero-filled when not used.
- 2 All alphanumeric fields are to be left justified and space-filled when not used.
- 3 Not all fields in the data records are required. Refer to the record layouts and schedules to determine which fields are required for the schedules you are submitting on the diskette file.
- 4 Incompatible files or variances from these specifications shall not be accepted. Any file that cannot be read will be required to be replaced.

Record Layouts and Schedules

To ensure proper formatting of records, an example of each schedule has been included in this book with a record layout. The record layout for an entry record is the same for all schedules. However, each schedule requires varying information. Thus, each schedule is listed with its report layout requirements.

The record layouts have a column titled "FLD" that numbers each field in the record. The example schedules have circled numbers that correspond to these field numbers.

If the field number does not have a corresponding number on the schedule, enter whatever is shown in the "Remarks" column of the record layout.

Date Fields

The century must not be included for reporting periods and invoice dates on the magnetic media records.

Gallon Fields

The invoice gallon field for 'E' records is 10 bytes long. This includes a one digit decimal position. The decimal point is implied and should not be entered. Gallons should be rounded to the nearest whole gallon. The field should be right justified and left zero filled with a zero in the one digit decimal position.

Example: 25,963.6 gallons would be rounded and entered as 0000259640.

25,963.2 gallons would be rounded and entered as 0000259630.

The total invoice gallon field on record types 'S', 'V', and 'Z' is 15 bytes long with a one digit decimal position. The decimal point is implied and should not be entered. The field should be right justified and left zero filled with a zero in the one digit decimal position.

Example: 245,693.0 gallons would be entered as 000000002456930.

For Schedule MG and MS each whole gallon of the primary and blending agent must add together to exactly equal the end product.

To accumulate the total record gallons:

- 'S' record gallons are accumulated by adding all 'E' record gallons for the specified schedule with a filing indicator of 'O' or 'C'. Gallons with a filing indicator 'R' and 'N' should be subtracted from the total.
- Gallons for record 'V' should be the accumulated gallons for all 'S' records for the specified license number.
- Gallons for record 'Z' should be the accumulated gallons for all 'V' records.

Contact Information

Call us at: 1 800 732-8866 or 217 782-2291

Call our TDD at: 1 800 544-5304

(telecommunications device for the deaf)

Write us at: MOTOR FUEL COMPLIANCE REVIEW AND LICENSING SECTION

ILLINOIS DEPARTMENT OF REVENUE

P O BOX 19477

SPRINGFIELD IL 62794-9477

For technical help: 217 785-6744

(Diskettes)

A1234

(18)

AB Trucking

(31)

1 <u>07/17/2000</u>

MFT, UST, and EIF Gasoline Products Produced, Acquired, Received, or Transported into Illinois

Chicago, IL

Page ____ of ____

15,000

(22)

Step 1: Complete the following information

Gas & Oil Co. Company name D-04321 Your license number Reporting period 0 Moi	<u>1</u> 7/2 0 0 0	9 2	☐ MFT-free only ☐ UST-/EIF-free o	•	this page. 26	Gasoline produc	pe that you are listin its received in Illinois its imported into Illinois its produced in your I	ois
Step 2: Repo	ort your tax	c- and fee-fre	e purchases					
1 Invoice date	2 Invoice	3 Name of	4 Bill of lading or	5	6 Origin	7 Destination	8 Seller's	9 Invoiced
(month, day, year)	number	carrier	manifest number	Name of seller	(city and state)	(Illinois cities only)	license number	gallons

Test Oil Co.

(15)

B5678

(20)

Motor Fuel Uniform Schedules Schedule "A" (ENTRY) Record

Buffer: 256 FIXED LENGTH

D-02345

(16)

Springfield

(30)

Field #	Position	Length	Туре	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor '08' - for receiver
			N	3 - 7 Sequence #	(If '08', must be same as Field 16) Filer license number. (Leading zeroes, if 4 digit license number.)
			N A	8 Code 9 - 17 Filler	Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'A '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	Ν	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	А	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	Ν	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			Ν	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	Ν	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	N	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	SELLER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	SELLER NAME	Name of the seller. Space fill after complete name.

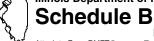
Motor Fuel Uniform Schedules Schedule "A" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

Field #	Position	Longth	Type	Field Description	Pomerke
Field #		Length	Type	Field Description	Remarks
16	94 - 113	20	N	SELLER LICENSE NUMBER 94 - 95 Type	Enter seller license type. '01' - for distributor '08' - for receiver (If '08', must be same as field 01)
			N	96 - 100 Sequence	Seller license number. (Leading zeroes, if 4 digit license number.)
			N A	101 Code 102 - 113 Filler	Zero fill. Space fill.
17	114 - 119	6	N	INVOICE DATE 114 - 115 Year	Enter a valid date. Enter last 2 digits only. Example: Enter year 2000 as '00'.
			N N	116 - 117 Month 118 - 119 Day	01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N	BILL OF LADING DATE 132 - 133 Year	Enter a valid date.
			N N	134 - 135 Month 136 - 137 Day	01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	Ν	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	TAX TYPE	Enter tax type. 1 - MFT-Free only 2 - UST-/EIF-Free only 3 - Both MFT - and UST-/EIF-Free
24	189 - 189	1	Α	STORAGE PERMIT INDICATOR	Space fill.
25	190 - 198	9	Α	PRODUCT CODE	Enter 3 character product code. * If not contained within code table, enter product name.
26	199 - 199	1	A/N	RECEIPT TYPE	Enter schedule gallon type. '1' - Illinois receipts '2' - Imported '3' - Produced
27	200 - 210	11	Α	FILLER	Space fill.
28	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
29	212 - 226	15	Α	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
30	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
31	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.
* PRODUC	T CODE				

GAS - GASOLINE

Motor Fuel Tax

Page ____ of __



Gasoline Products Sold to the Federal Government, Authorized Foreign Diplomats, Municipal Corporations Owning and Operating Local Transportation Systems, to Certain Privately Owned Public Utilities, Non-Recreational Type Watercraft, or for Aviation Purposes

Step 1: Complete the following information

Gas & Oil Co.	(8)
Company name	
D-04321	(1)
Your license number	
Reporting period $0 \frac{7}{2} 0 0 0$	(9)

Step 2: Report your nontaxable sales to the federal government, authorized foreign diplomats, etc.

	1	2	3	4	5	6	7	8	
	Invoice date	Invoice or	Name of	Bill of lading or		Origin	Destination	Invoiced	
	(month, day, year)	serial number	carrier	manifest number	Name of purchaser	(Illinois cities only)	(Illinois cities only)	gallons	
1	0718/2000	C15643	XZ Transport	A19565	Test Oil Co.	Moline	Rock Island	9,500	
	(17)	(10)	(30)	<u></u>	(15)	(28)	600	(22)	
2	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	(10)	30	(20)	(15)	20	(29)	(_

Motor Fuel Uniform Schedules Schedule "B" (ENTRY) Record Buffer: 256 FIXED LENGTH

Field # **Position** Length Type Field Description Remarks 1 1 - 17 **FILER LICENSE** 17 Ν 1 - 2 Type Enter filer license type. '01' - for distributor Ν 3 - 7 Sequence # Filer license number. (Leading zeroes, if 4 digit license number.) Ν 8 Code Zero fill. 9 - 17 Filler Space fill. Α 2 18 - 20 3 **IDOR SCHEDULE TYPE** Enter 'B '. 3 21 - 22 2 Α **FILER PERMIT KIND** Not used by IDOR. Space fill. 2 4 23 - 24 N **FILER LICENSE YEAR** Not used by IDOR. Zero fill. **RECORD TYPE** 5 25 - 25 1 Α Entry type. Enter an 'E'. Α FILING INDICATOR 6 26 - 26 1 Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data FILER PETRODEX INDICATOR Not used by IDOR. Zero fill. 7 27 - 27 1 Ν 8 28 - 47 20 A/N FILER NAME Complete name of the filer. Space fill after complete name. 9 48 - 51 4 LIABILITY DATE Enter valid date. Ν 48 - 49 Year Enter last 2 digits only. Example: Enter Year 2000 as '00'. Ν 50 - 51 Month 01 - 12. 5 Α **FILLER** Space fill. 10 52 - 56 11 57 - 60 4 Α **CARRIER CODE** Not used. Space fill. 12 61 - 66 6 N **ORIGIN CODE** Not used. Zero fill. 67 - 72 6 **DESTINATION CODE** Not used. Zero fill. 13 **PURCHASER PETRODEX** 73 - 73 N Not used by IDOR. Zero fill. 14 1 **INDICATOR** 74 - 93 20 A/N **PURCHASER NAME** Name of the purchaser. 15 Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "B" (ENTRY) Record (continued)

Buffer: 256 FIXED LENGTH

Field #	Position	Length	Туре	Field Description	Remarks
16	94 - 113	20	N N N A	PURCHASER LICENSE NUMBER 94 - 95 Type 96 - 100 Sequence # 101 Code 102 - 113 Filler	Zero fill. Zero fill. Zero fill. Space fill.
17	114 - 119	6	N N N	INVOICE DATE 114 - 115 Year 116 - 117 Month 118 - 119 Day	Enter a valid date. Enter last 2 digits only. Example: Enter year 2000 as '00'. 01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N N N	BILL OF LADING DATE 132 - 133 Year 134 - 135 Month 136 - 137 Day	Enter a valid date. 01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	FILLER	Zero fill.
24	189 - 189	1	Α	STORAGE PERMIT INDICATOR	Space fill.
25	190 - 198	9	Α	PRODUCT CODE	Enter 3 character product code. * If not contained within code table, enter product name.
26	199 - 210	12	Α	FILLER	Space fill.
27	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
28	212 - 226	15	Α	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
29	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
30	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.

* PRODUCT CODE

GAS - GASOLINE

MFT, UST, and EIF Sales and Transfers of Gasoline Products **Delivered to Points Outside of Illinois**

Step 1: Complete the following information

Gas & Oil Co.	(8)
Company name	
D-04321	(1)
Your license number	
MO	(27)
Name of state into which shipments were made	$\overline{}$
Reporting period $0.7/2.0.0$	(9)

Step 2: Report your exported gallons

	1 Invoice date	2 Invoice	3 Name of	4 Bill of lading or	5	6 Origin	7 Destination	8 Invoiced
	(month, day, year)	number	carrier	manifest number	Name of purchaser	(Illinois cities only)	(city and state)	gallons
1	07/20/2000	169877	ABC Trucking	B165544	Test Oil Co.	Springfield	St. Louis, MO	8,800
າ	17	18)	31)	20	15)	29	30	22

Motor Fuel Uniform Schedules Schedule "C" (ENTRY) Record

Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor '08' - for receiver
			N	3 - 7 Sequence #	Filer license number. (Leading zeroes, if
			N A	8 Code 9 - 17 Filler	4 digit license number.) Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'C '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	A	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			N	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	N	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	N	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	PURCHASER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	PURCHASER NAME	Name of the purchaser. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "C" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

					Buffer: 256 FIXED LENGTH
Field #	Position	Length	Type	Field Description	Remarks
16	94 - 113	20	N N N A	PURCHASER LICENSE NUMBER 94 - 95 Type 96 - 100 Sequence # 101 Code 102 - 113 Filler	Zero fill. Zero fill. Zero fill. Space fill.
17	114 - 119	6	N N N	INVOICE DATE 114 - 115 Year 116 - 117 Month 118 - 119 Day	Enter a valid date. Enter last 2 digits only. Example: Enter year 2000 as '00'. 01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N N N	BILL OF LADING DATE 132 - 133 Year 134 - 135 Month 136 - 137 Day	Enter a valid date. 01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	FILLER	Zero fill.
24	189 - 189	1	Α	STORAGE PERMIT INDICATOR	Space fill.
25	190 - 198	9	Α	PRODUCT CODE	Enter 3 character product code. * If not contained within code table, enter product name.
26	199 - 208	10	Α	FILLER	Space fill.
27	209 - 210	2	Α	EXPORT STATE	Enter valid postal abbreviation for the export state.
28	211-211	1	Α	MEDIA CODE	Enter 'D' for diskette.
29	212 - 226	15	Α	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
30	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
31	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.

^{*} PRODUCT CODE

GAS - GASOLINE

Illinois Department of Revenue

Attach to Form RMFT-5 or Form RMFT-5-US

MFT, UST, and EIF
Gasoline Products Sold and Distributed Tax- and Fee-Free in Illinois to Licensed Distributors and Receivers

Step 1: Complete the following information

Test Oil Co.	8
Company name D-02345	(1)
<u> </u>	_'/
Your license number	9

Check the tax/fee type you are listing on this page. MFT-free only

UST-/EIF-free only

☐ Both MFT- and UST-/EIF-free

Step 2: Report your tax- and fee-free sales

1	2	3	4	5	6	7	8	9
Invoice date (month, day, year)	Invoice number	Name of carrier	Bill of lading or manifest number	Name of purchaser	Origin (Illinois cities only)	Destination (Illinois cities only)	Purchaser's license number	Invoiced gallons
1 07/17/2000	A1234	XT Transport	B5678	Gas & Oil Co.	Joliet	Lincoln	D-04321	15,000
(17)	(18)	30	20	(15)	(28)	(29)	(16)	(22)
\mathbf{U}	(I)	<u> </u>	20	·				

Motor Fuel Uniform Schedules Schedule "D" (ENTRY) Record

Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor '08' - for receiver (If '08', must be same as field 16)
			N	3 - 7 Sequence #	Filer license number. (Leading zeroes, if 4 digit license number.)
			N A	8 Code 9 - 17 Filler	Zero fill. Space fill.
2	18 - 20	3	A	IDOR SCHEDULE TYPE	Enter 'D '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	Α	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	Ν	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			N	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	N	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	Ν	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	PURCHASER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	PURCHASER NAME	Name of the purchaser. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "D" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

						Duller: 230 FIXED LENGTH
Field #	Position	Length	Type	Field Descrip	otion	Remarks
16	94 - 113	20		PURCHASER LI	CENSE NUMBER	
			N	94 - 95	Туре	Enter purchaser license type: '01' - for distributor '08' - for receiver (If '08', must be same as field 01)
			N	96 - 100	Sequence #	Purchaser license number. (Leading zeroes, if 4 digit license number.)
			N A	101 102 - 113	Code Filler	Zero fill. Space fill.
17	114 - 119	6	N	INVOICE DATE 114 - 115 Year		Enter a valid date. Enter last 2 digits only. Example: Enter year 2000 as '00'.
			N N	116 - 117 Month 118 - 119 Day	1	01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUME	BER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N.I.	BILL OF LADIN	IG DATE	Enter a valid date.
			N N	132 - 133 Year 134 - 135 Month	ı	01 - 12.
			N	136 - 137 Day		01 - 31.
20	138 - 147	10	A/N	BILL OF LADIN	IG	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER		Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	•	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	TAX TYPE		Enter tax type. 1 - MFT-Free only 2 - UST-/EIF-Free only 3 - Both MFT- and UST-/EIF-Free
24	189 - 189	1	Α	STORAGE PER	MIT INDICATOR	Space fill.
25	190 - 198	9	Α	PRODUCT COL	DE	Enter 3 character product code. * If not contained within code table, enter product name.
26	199 - 210	12	Α	FILLER		Space fill.
27	211-211	1	Α	MEDIA CODE		Enter 'D' for diskette.
28	212 - 226	15	Α	ORIGIN NAME 212 - 224 City 225 - 226 State		Enter origin name. Space fill after complete name.
29	227 - 241	15	Α	DESTINATION N 227 - 239 City 240 - 241 State	NAME	Enter destination name. Space fill after complete name.
30	242 - 256	15	Α	CARRIER NAM	E	Enter carrier name. Space fill after complete name.

^{*} PRODUCT CODE

GAS - GASOLINE



MFT, UST, and EIF Tax- and Fee-Paid Purchases

Pege	of	
------	----	--

Step 1: Complete the following information Gas & Oil Co. D-04321 The formation 23 Christothe type you are listing on this page. MFT-paid only Kust-Reperting period 07/2 0 0 0 Both MFT- and UST/EIF-paid					25 Check the product type you are listing on this page. Gasoline products Combustible gases Abothol				
Step 2: Rep	involce number	x- and fee-paid 3 Name of santer AZ Trucking	purchases 4 End lichigo Facilist mater L98765	5 Name of seller Test Oil Co.	Chicago	Peoria	Select D-02045	5 Incided gallers 4,000	
2 (17)	(18)	(30)	(20)	(15)	(28)	29)	(16)	(22)	

Motor Fuel Uniform Schedules Schedule "E" (ENTRY) Record

Field #	Position	Length	Туре	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor '08' - for receiver
			N	3 - 7 Sequence #	(If '08', must be same as field 16) Filer license number. (Leading zeroes, if 4 digit license number.)
			N A	8 Code 9 - 17 Filler	Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'E '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	А	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			N	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	N	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	N	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	SELLER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	SELLER NAME	Name of the seller. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "E" (ENTRY) Record (continued)

Buffer: 256 FIXED LENGTH

					Butter: 256 FIXED LENGTH
Field #	Position	Length	Type	Field Description	Remarks
16	94 - 113	20		SELLER LICENSE NUMBER	
			N	94 - 95 Type	Enter seller license type: '01' - for distributor '08' - for receiver (If '08', must be same as field 01)
			N	96 - 100 Sequence #	Seller license number. (Leading zeroes, if 4 digit license number.)
			N A	101 Code 102 - 113 Filler	Zero fill. Space fill.
17	114 - 119	6	N N	INVOICE DATE 114 - 115 Year 116 - 117 Month	Enter a valid date. Enter last 2 digits only. Example: Enter year 2000 as '00'. 01 - 12.
			N	118 - 119 Day	01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N	BILL OF LADING DATE 132 - 133 Year	Enter a valid date.
			N N	134 - 135 Month 136 - 137 Day	01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	TAX TYPE	Enter tax type. 1 - MFT-Paid only 2 - UST-/EIF-Paid only 3 - Both MFT- and UST-/EIF-Paid
24	189 - 189	1	Α	FILLER	Space fill.
25	190 - 198	9	А	PRODUCT CODE	Enter 3 character product code. * If not contained within code table, enter product name.
26	199 - 210	12	Α	FILLER	Space fill.
27	211-211	1	Α	MEDIA CODE	Enter 'D' for diskette.
28	212 - 226	15	А	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
29	227 - 241	15	A	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
30	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.

* PRODUCT CODE

GAS - GASOLINE ALC - ALCOHOL

CNG - COMBUSTIBLE GASES

MFT, UST, and EIF Products Used for Blending

Dozen	anfi
	1.0

Step 1: Complete the following information

	Gas & Oll Co.	(8)
Стриу мис	D-05633	1
Reporting parted	10/2007	9

Do not report apsolal fuel (auch en diesel) on this schedule. Use Schedule M-Special Fuels.

Step 2: Report your blending activity ((if adjumn 2a, 8a, or 4b is used, write the exact name of the product on the line provided.)				
Primary product gallons				Blanding agent gallone Total and product gallone				octuat gallana
Ellended dinte	(Pimpo	rt arei product typii par b	rpegs.) O Other (damilly)		ь	O Critica (Internity)	•	b Office (daming)
(result, day, year)	Constitut	Eherol		Constitut	Eheroi	. —	Geschol	
1 10072007	6,343				660		7,003	
2 19	28				32		23	

Motor Fuel Uniform Schedules Schedule "M" - Gasoline (ENTRY) Record

Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor
			Ν	3 - 7 Sequence #	Filer license number. (Leading zeroes, if 4 digit license number.)
			N A	8 Code 9 - 17 Filler	Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'MG '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	Α	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	Ν	FILLER	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			Ν	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	Ν	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	Ν	DESTINATION CODE	Not used. Zero fill.
14	73-73	1	Ν	FILLER	Not used by IDOR. Zero fill.
15	74-93	20	A/N	PURCHASER NAME	Space fill.

Motor Fuel Uniform Schedules Schedule "M" - Gasoline (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

Field #	Position	Length	Туре	Field Description	Remarks
16	94 - 113	20	N N N	PURCHASER LICENSE NUMBER 94 - 95 Type 96 - 100 Sequence # 101 Code 102 - 113 Filler	Zero fill. Zero fill. Zero fill. Space fill.
17	114 - 119	6	N	INVOICE DATE	Zero fill.
18	120 - 131	12	Α	INVOICE NUMBER	Space fill.
19	132 - 137	6	N N N	BLENDING DATE 132 - 133 Year 134 - 135 Month 136 - 137 Day	Enter a valid date. Enter last 2 digits only. 01 - 12. 01 - 31.
20	138 - 146	9	Α	END PRODUCT CODE	Enter 3 character product code. *** If not contained within code table, enter product name.
21	147 - 147	1	Α	FILLER	Space fill.
22	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
23	178 - 187	10	N	END PRODUCT GALLONS	Total end product gallons. Format 9(9)V9.
24	188 - 188	1	N	FILLER	Zero fill.
25	189 - 189	1	Α	FILLER	Space fill.
26	190 - 198	9	Α	PRIMARY PRODUCT CODE	Enter 3 character product code. *** If not contained within code table, enter product name.
27	199 - 199	1	Α	FILLER	Space fill.
28	200 - 209	10	N	PRIMARY PRODUCT GALLONS	Primary product gallons. Format 9(9)V9
29	210 - 210	1	Α	FILLER	Space fill.
30	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette or CD.
31	212 - 221	10	N	BLENDING AGENT GALLONS Column a	Blending gasoline gallons Column a. Format 9(9)V9.
32	222 - 231	10	N	BLENDING AGENT GALLONS Column b	Blending ethanol/alcohol gallons Column b. Formal 9(9)V9.
33	232 - 240	9	Α	BLENDING AGENT NAME Column c	Enter actual product name. If different from gasoline or ethanol/alcohol.
34	241 - 250	10	N	BLENDING AGENT OTHER Gallons Column c	Blending other gallons Column c. Format 9(9)V9.
35	251 - 256	6	Α	FILLER	Space fill.

* PRODUCT CODE

GAS - GASOLINE

ETH - ETHANOL/ALCOHOL

GHL - GASOHOL

MFT, UST, and EIF Products Used for Blending

Page	 of

Step 1: Complete the following information

	Test Oil Co.	
Mary Mare	D-02346	<u>(1)</u>
Reporting parted 1, 0/	20 <u>0</u> 7	9

(28)

, (,19,)

Do not report gasoline blending on this schedule. Use Schedule M—Gasoline.

(23)

Step 2: Report your blending activity (r Column				n 8o ar 4b is used, v	write the excel nam	ne of the product on	the line provided	L}
1 Primary product gallons				3 Blending agent gallone Total and product gallone				4 oduat gellane
	(Рефо	it are product type per 5	rpege) O		ь	0		ь
Blanded date	Undyad	Dyad	Office (Identity)			Officer (Identity)	BloPelro	Officer (Identity)
(result, day, year)	Dimmi	C-ii		B100/Sey Of	1-K Kercento	. ———	Chood Share!	
1 1007/2007	6,676			B40			7,616	

31

Motor Fuel Uniform Schedules Schedule "M" - Special Fuels (ENTRY) Record

Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor '02' - for supplier
			N	3 - 7 Sequence #	Filer license number. (Leading zeroes, if 4 digit license number.)
			N A	8 Code 9 - 17 Filler	Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'MS '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	Α	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILLER	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			N	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	N	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	N	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	FILLER	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	PURCHASER NAME	Space fill.

Motor Fuel Uniform Schedules Schedule "M" - Special Fuels (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

Field #	Position	Length	Туре	Field Description	Remarks
16	94 - 113	20	N N N A	PURCHASER LICENSE NUMBER 94 - 95 Type 96 - 100 Sequence # 101 Code 102 - 113 Filler	Zero fill. Zero fill. Zero fill. Space fill.
17	114 - 119	6	N	INVOICE DATE	Zero fill.
18	120 - 131	12	Α	INVOICE NUMBER	Space fill.
19	132 - 137	6	N N	BLENDING DATE 132 - 133 Year 134 - 135 Month	Enter a valid date. Enter last 2 digits only. Example: Enter year 2000 as '00'. 01 - 12.
			N	136 - 137 Day	01 - 31.
20	138 - 146	9	Α	END PRODUCT CODE	Enter 3 character product code. *** If not contained within code table, enter product name.
21	147 - 147	1	Α	FILLER	Space fill.
22	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
23	178 - 187	10	N	END PRODUCT GALLONS	Total end product gallons. Format 9(9)V9.
24	188 - 188	1	N	FILLER	Zero fill.
25	189 - 189	1	Α	FILLER	Space fill.
26	190 - 198	9	Α	PRIMARY PRODUCT CODE	Enter 3 character product code. *** If not contained within code table, enter product name.
27	199 - 199	1	Α	FILLER	Space fill.
28	200 - 209	10	N	PRIMARY PRODUCT GALLONS	Primary product gallons. Format 9(9)V9
29	210 - 210	1	Α	FILLER	Space fill.
30	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette or CD.
31	212 - 221	10	N	BLENDING AGENT GALLONS Column a	Blending soy gallons Column a. Format 9(9)V9.
32	222 - 231	10	N	BLENDING AGENT GALLONS Column b	Blending 1K gallons Column b. Formal 9(9)V9.
33	232 - 240	9	Α	BLENDING AGENT NAME Column c	Enter actual product name. If different from soy or 1K.
34	241 - 250	10	N	BLENDING AGENT OTHER Gallons Column c	Blending other gallons Column c. Format 9(9)V9.
35	251 - 256	6	Α	FILLER	Space fill.

* PRODUCT CODE

SPF - UNDYED DIESEL DYE - DYED DIESEL SOY - SOY OIL/BI00/B99.9 1K - 1-K KEROSENE BIO - BIO DIESEL/PETRO BLEND



(18)

Motor Fuel Tax Alcohol, Compressed Gases, or 1-K Kerosene Sold in Illinois as Motor Fuel

Pape	caf

(22)

(16)

Step 1: Complete the following information

(30)

		8			Ch	esk the product ty	the item are jegjud o	n this page.
Your license number		(1)			8	LP gas Alcohol (25))	
Reporting period		- 9				1-k kerosene Other (specify:		
Step 2: Rep	ort your ta	x-paid sales						
1 Invoice date	2 Irredice	3 Name of	4 Hill of lading or	5	G Cirtain	7 Desiration	8 Purchaser's	9 Involved

Motor Fuel Uniform Schedules Schedule "GA-1" (ENTRY) Record

(15)

(20)

(28)

		0011	oddic	(2.11111)	Buffer: 256 FIXED LENGTH
Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor
			N	3 - 7 Sequence #	'02' - for supplier Filer license number. (Leading zeroes, if 4 digit license number.)
			N A	8 Code 9 - 17 Filler	Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'GA1'.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	Ν	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	Α	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	Ν	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			N	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	Ν	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	Ν	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	PURCHASER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	PURCHASER NAME	Name of the purchaser. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "GA-1" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

						Bullet. 230 FIXED LENGTH
Field #	Position	Length	Type	Field Desc	ription	Remarks
16	94 - 113	20		PURCHASEI	R LICENSE NUMBER	
			A/N	94 - 95	Туре	Enter purchaser license type: '01' - for distributor '02' - for supplier 'RO'- for retail outlet
			N	96 - 100	Sequence #	Purchaser license number. (Leading zeroes, if 4 digit license number.) If 'RO', enter zeroes.
			N	101	Code	Zero fill.
			Α	102 - 113	Filler	Space fill.
17	114 - 119	6		INVOICE DA		Enter a valid date.
			N	114 - 115 Ye	ar	Enter last 2 digits only. Example: Enter year 2000 as '00'.
			N	116 - 117 Mo	onth	01 - 12.
			Ν	118 - 119 Da	ay	01 - 31.
18	120 - 131	12	A/N	INVOICE NU	JMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6		BILL OF LA		Enter a valid date.
			N	132 - 133 Ye		01 10
			N N	134 - 135 Mo 136 - 137 Da		01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LA	•	Enter bill of lading or manifest number.
20	100 147	10	7014	DILL OF LA	Birta	No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER		Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLO	DNS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	Ν	FILLER		Zero fill.
24	189 - 189	1	Α	STORAGE P	PERMIT INDICATOR	Space fill.
25	190 - 198	9	Α	PRODUCT	CODE	Enter 3 character product code. * If not contained within code table, enter product name.
26	199 - 210	12	Α	FILLER		Space fill.
27	211-211	1	Α	MEDIA COD	DΕ	Enter 'D' for diskette.
28	212 - 226	15	А	ORIGIN NAI 212 - 224 Ci 225 - 226 St	ty	Enter origin name. Space fill after complete name.
29	227 - 241	15	Α	DESTINATIO 227 - 239 Ci 240 - 241 St	ty	Enter destination name. Space fill after complete name.
30	242 - 256	15	Α	CARRIER N	AME	Enter carrier name. Space fill after complete
* PRODUC	CT CODE					name.

* PRODUCT CODE -----

LPG - LIQUID PROPANE GAS

1K - KEROSENE ALC - ALCOHOL

8	Illinois Department of Revenue
$\langle \rangle$	Illinois Department of Revenue Schedule DA Alach beform RMF16 or from RMF16 US
ુર /	Allach to From RMFF 6 or From RMFT 6 US

MFT, UST, and EIF Dyed Diesel Fuel Produced, Acquired, Received, or Transported into Illinois

Рвре	at	f

Step 1: Complete the following information

The large same	Check the taoliee type you are listing on this page. MFFfree only UST-/EIF-free only	Check the receipt type you are listing on this page. Dyest diesel fuel received in litinois.
Reporting period	Both MFF and UST/EF-free	Dyed diesel fuel produced in Illinois

Step 2: Report your tax- and fee-free purchases

1 Invoice date (nunti, da, year)	2 Inche number	3 Name of canter	4 Hill of lading or maillest number	5 Name of seller	6 Crigin (city and state)	7 Destruitor (Minds cities only)	\$ Selets Beesse number	9 Invoked gallens
1 _ /_ /								
2 (17)	(18)	(30)	(20)	(15)	(28)	(29)	(16)	(22)

Motor Fuel Uniform Schedules Schedule "DA" (ENTRY) Record

Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor '02' - for supplier '08' - for receiver (if '08', must be same as field 16)
			N	3 - 7 Sequence #	Filer license number. (Leading zeroes, if 4 digit license number.)
			N A	8 Code 9 - 17 Filler	Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'DA '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	Α	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			Ν	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	Ν	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	N	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	SELLER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	SELLER NAME	Name of the seller. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "DA" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

					Duller: 200 FIXED LENGTH
Field #	Position	Length	Type	Field Description	Remarks
16	94 - 113	20	N	SELLER LICENSE NUMBER	Enter coller licence type:
			N	94 - 95 Type	Enter seller license type: '01' - for distributor '02' - for supplier '08' - for receiver (If '08', must be same as field 01)
			N	96 - 100 Sequence #	Seller license number. (Leading zeroes, if 4 digit license number.)
			N A	101 Code 102 - 113 Filler	Zero fill. Space fill.
17	114 - 119	6	N	INVOICE DATE 114 - 115 Year	Enter a valid date. Enter last 2 digits only. Example: Enter year 2000 as '00'.
			N N	116 - 117 Month 118 - 119 Day	01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N	BILL OF LADING DATE 132 - 133 Year	Enter a valid date.
			N N	134 - 135 Month 136 - 137 Day	01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	TAX TYPE	Enter tax type. 1 - MFT-Free only 2 - UST-/EIF-Free only 3 - Both MFT- and UST-/EIF-Free
24	189 - 198	10	Α	FILLER	Space fill.
25	199 - 199	1	A/N	RECEIPT TYPE	Enter schedule gallon type. '1' - Illinois receipts '2' - Imported '3' - Produced
26	200 - 210	11	Α	FILLER	Space fill.
27	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
28	212 - 226	15	Α	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
29	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
30	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.



Illinois Department of Revenue

Schedule DB

Motor Fuel Tax

Dyed Diesel Fuel sold for Nonhighway Use to the Faderal Government, Authorized Foreign Diplomats, Municipal Corporations Owning and Operating Local Transportation Form RMFFs Systems, to Certain Privately Owned Public Utilities

af .

Page

Step 1: Complete the following information

Gas & Oil Co.	8
Company norms	\overline{X}
S-04321	(1)
Van Barres nurtur	(9)
Reporting period 0.7 ± 2	000

Step 2: Report your nontaxable sales to the federal government, authorized foreign diplomats, etc.

1 2 Invoice date invoic (month, day year) cartel n		4 Bill of Inding or marited number	6 Name of purchaser	6 Crigin (Minus cilina crity)	7 Desilvation (Minus cities only)	U Involunt gallans
1 07/17/2000 12	356 Carrier Co	. B9750	ABX Mass Transit	Morris	Monmouth	15,000
2 (17) 18	29	20	(15)	(27) (2	8	22
		49	19	(*)	(P)	=====================================

Motor Fuel Uniform Schedules Schedule "DB" (ENTRY) Record

Buffer: 256 FIXED LENGTH Field # **Position** Length Type Field Description Remarks **FILER LICENSE** 1 - 17 17 Enter filer license type. Ν 1 - 2 Type '01' - for distributor '02' - for supplier 3 - 7 Sequence # Filer license number. (Leading zeroes, if Ν 4 digit license number.) Ν Code Zero fill. Space fill. Α 9 - 17 Filler 2 **IDOR SCHEDULE TYPE** 18 - 20 3 Enter 'DB '. 3 21 - 22 2 **FILER PERMIT KIND** Not used by IDOR. Space fill. 23 - 24 2 Ν **FILER LICENSE YEAR** Not used by IDOR. Zero fill. 4 5 25 - 25 Α **RECORD TYPE** Entry type. Enter an 'E'. FILING INDICATOR 6 26 - 261 Α Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data 7 FILER PETRODEX INDICATOR 1 Ν Not used by IDOR. Zero fill. 27 - 27 8 28 - 47 20 A/N FILER NAME Complete name of the filer. Space fill after complete name. LIABILITY DATE Enter valid date. 9 48 - 51 4 Ν 48 - 49 Year Enter last 2 digits only. Example: Enter Year 2000 as '00'. Ν 50 - 51 Month 01 - 12. 5 Α **FILLER** 10 52 - 56 Space fill. 11 57 - 60 4 Α **CARRIER CODE** Not used. Space fill. 61 - 66 Ν **ORIGIN CODE** Not used. Zero fill. 12 6 67 - 72 6 Ν **DESTINATION CODE** Not used. Zero fill. 13 73 - 73 **PURCHASER PETRODEX** Not used by IDOR. Zero fill. 14 1 Ν **INDICATOR**

Motor Fuel Uniform Schedules Schedule "DB" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

Field #	Position	Length	Туре	Field Description	Remarks
15	74 - 93	20	A/N	PURCHASER NAME	Name of the purchaser. Space fill after complete name.
16	94 - 113	20	N N N A	PURCHASER LICENSE NUMBER 94 - 95 Type 96 - 100 Sequence # 101 Code 102 - 113 Filler	Zero fill. Zero fill. Zero fill. Space fill.
17	114 - 119	6	N N N	INVOICE DATE 114 - 115 Year 116 - 117 Month 118 - 119 Day	Enter a valid date. Enter last 2 digits only. Example: Enter year 2000 as '00'. 01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N N N	BILL OF LADING DATE 132 - 133 Year 134 - 135 Month 136 - 137 Day	Enter a valid date. 01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	Ν	FILLER	Zero fill.
24	189 - 189	1	Α	STORAGE PERMIT INDICATOR	Space fill.
25	190 - 210	21	Α	FILLER	Space fill.
26	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
27	212 - 226	15	Α	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
28	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
29	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.

MFT, UST, and EIF Sales and Transfers of Dyed Diesel Fuel Delivered to Points Outside of Illinois

Step 1: Complete the following information

Congression and Constitution of the Constituti
Ter Barne survice
Name of state with which shipments were made
Reporting period/

Step 2: Report your exported gallons

	1 Invoke dale (mail, dag yan)	2 Inche number	3 Named carter	4 80 of leding or marified number	5 Name of purchaser	G Origin (Minch ciles only)	7 Declination (city and state)	8 Involved gallous
1								
2	1.1							

Motor Fuel Uniform Schedules Schedule "DC" (ENTRY) Record

					Bullet. 230 FIXED LENGTH
Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor '02' - for supplier '08' - for receiver
			N N	3 - 7 Sequence # 8 Code	Filer license number. (Leading zeroes, if 4 digit license number.) Zero fill.
			Α	9 - 17 Filler	Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'DC '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	A	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			N	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	N	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	Ν	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	PURCHASER PETRODEX INDICATOR	Not used by IDOR. Zero fill.

Motor Fuel Uniform Schedules Schedule "DC" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

Field #	Position	Length	Туре	Field Description	Remarks
15	74 - 93	20	A/N	PURCHASER NAME	Name of the purchaser. Space fill after complete name.
16	94 - 113	20	N N N A	PURCHASER LICENSE NUMBER 94 - 95 Type 96 - 100 Sequence # 101 Code 102 - 113 Filler	Zero fill. Zero fill. Zero fill. Space fill.
17	114 - 119	6	N N N	INVOICE DATE 114 - 115 Year 116 - 117 Month 118 - 119 Day	Enter a valid date. Enter last 2 digits only. Example: Enter year 2000 as '00'. 01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N N N	BILL OF LADING DATE 132 - 133 Year 134 - 135 Month 136 - 137 Day	Enter a valid date. 01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	FILLER	Zero fill.
24	189 - 189	1	Α	STORAGE PERMIT INDICATOR	Space fill.
25	190 - 208	19	Α	FILLER	Space fill.
26	209-210	2	Α	EXPORT STATE	Enter valid postal abbreviation for the export state.
27	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
28	212 - 226	15	Α	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
29	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
30	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.



Reputing period 0.7/2000

MFT, UST, and EIF Dyed Diesel Fuel Sold and Distributed

AMACH TO FORM MONE IS OF FORM MONE IN	AS MA- MINI PEC-FICE BY MINING TO LINCEISEN DISERVO	шь и зирист
Step 1: Complete the follow	ving information	<u>(23)</u>
Test Oil Co.	8)	Check the tasties type you are listing on this page.
D-02345	<u>1</u>	☐ MFT-free only
The Rente number	`	UST/EIF-free only
Requiring period $0.7i2000$	9)	Both MFT- and UST/BF-free

Page ____ of _

Step 2: Report your tax- and fee-free sales and distributions

	1 invoice dale (morit, day, year)	2 Imalize number	3 Name of carter	4 Bill of lasting or manifest number	5 Name of purchases	6 Odgh (Whols clies ody)	7 Destination (Whole cities only)	8 Puntane's Rome number	9 Invoiced gallons
1	0718 2000	3579	AB Carrier	K2468	Gas & Oil Co.	Peoria	Morton	D-04321	20,000
2	(17)	(18)	28)	(20)	(15)	(26)	(27)	(16)	(22)

Motor Fuel Uniform Schedules Schedule "DD" (ENTRY) Record

Buffer: 256 FIXED LENGTH Field # **Position** Length **Type Field Description** Remarks 1 - 17 17 **FILER LICENSE** 1 - 2 Type Enter filer license type. '01' - for distributor

			N N A	3 - 7 Sequence # 8 Code 9 - 17 Filler	'02' - for supplier '02' - for supplier '08' - for receiver (If '08', must be same as Field 16) Filer license number. (Leading zeroes, if 4 digit license number.) Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'DD '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	Α	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
		2 N FILER LICENSE YEAR NO 1 A RECORD TYPE Ent 1 A FILING INDICATOR Tra 1 N FILER PETRODEX INDICATOR No 20 A/N FILER NAME Co Spa 4 LIABILITY DATE Ent Exa N 50 - 51 Month 01 5 A FILLER Spa 4 CARRIER CODE No	01 - 12.		
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	N	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	N	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	PURCHASER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	PURCHASER NAME	Name of the purchaser. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "DD" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

					Bullet. 230 FIXED LENGTH
Field #	Position	Length	Type	Field Description	Remarks
16	94 - 113	20		PURCHASER LICENSE NUMBER	
			N	94 - 95 Type	Enter purchaser license type: '01' - for distributor '02' - for supplier '08' - for receiver
			N	96 - 100 Sequence #	(If '08', must be same as Field 01) Purchaser license number. (Leading zeroes, if 4 digit license number.)
			N	101 Code	Zero fill.
			Α	102 - 113 Filler	Space fill.
17	114 - 119	6	N	INVOICE DATE 114 - 115 Year	Enter a valid date. Enter last 2 digits only. Example: Enter year 2000 as '00'.
			N	116 - 117 Month	01 - 12.
			N	118 - 119 Day	01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6		BILL OF LADING DATE	Enter a valid date.
			N	132 - 133 Year	04.40
			N N	134 - 135 Month 136 - 137 Day	01 - 12. 01 - 31.
				•	
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	TAX TYPE	Enter tax type. 1 - MFT-Free only 2 - UST-/EIF-Free only 3 - Both MFT- and UST-/EIF-Free
24	189 - 210	22	Α	FILLER	Space fill.
25	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
26	212 - 226	15	Α	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
27	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill ater complete name.
28	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.

Motor Fuel Tax Tax-Free Sales of Dyed Diesel Fuel Products to Other than a Distributor or Supplier in Illinois

Page ____ of ____

Step 1: Complete the following information

Gas & Oil Co.	(8)
D-04321	$\overline{1}$
Your barrier combin	\simeq
Reporting period $0.7/2.00$	(9)

Step 2: Report your tax-free sales

(25)

	<u> -</u>		$\overline{}$
A - Agriculture C - Construction	F - Refrigeration H - Home heating I - Industrial L - Lawn	M - Marine R - Railroad	O - Other (Identify)

	Name of purchaser	(*	2 Address of purchaser treet address, city state, ZIP)	3 Fuel use code	4 Total monthly gallons		
ı	Good Food, Inc.	1215 W. Adams	Springfield, IL	62701	, Α	2,000	
<u> </u>	(15)	(28)	29)	(30)	(24)	(22)	

Motor Fuel Uniform Schedules Schedule "DD-1" (ENTRY) Record

					Buller: 256 FIXED LENGTH
Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor '02' - for supplier
			N N	3 - 7 Sequence # 8 Code	Filer license number. (Leading zeroes, if 4 digit license number.) Zero fill.
		_	A	9 - 17 Filler	Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'DD1'.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	Ν	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	A	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			Ν	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Space fill.
12	61 - 66	6	N	ORIGIN CODE	Zero fill.
13	67 - 72	6	N	DESTINATION CODE	Zero fill.
14	73 - 73	1	N	PURCHASER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	PURCHASER NAME	Name of the purchaser. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "DD-1" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

Field #	Position	Length	Туре	Field Description	Remarks
16	94 - 113	20	N N N A	PURCHASER LICENSE NUMBER 94 - 95 Type 96 - 100 Sequence # 101	Zero fill. Zero fill. Zero fill. Space fill.
17	114 - 119	6	N	INVOICE DATE	Zero fill.
18	120 - 131	12	A/N	INVOICE NUMBER	Space fill.
19	132 - 137	6	N	BILL OF LADING DATE	Zero fill.
20	138 - 147	10	A/N	BILL OF LADING	Space fill.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	FILLER	Zero fill.
24	189 - 189	1	A	FUEL USAGE CODE	Enter 1 character usage code: 'A' - Agriculture 'C' - Construction 'F' - Refrigeration 'H' - Home heating 'I' - Industrial 'L' - Lawn 'M' - Marine 'R' - Railroad 'O' - Other
25	190 - 198	9		FUEL USAGE DESCRIPTION	If fuel usage code is 'O', specify other fuel usage description.
26	199 - 210	12	Α	FILLER	Space fill.
27	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
28	212 - 226	15	Α	PURCHASER STREET ADDRESS	Enter street address of purchaser.
29	227 - 241	15	Α	PURCHASER CITY & STATE 227 - 239 City 240 - 241 State	Enter city & state of purchaser. Enter city of purchaser. Enter state of purchaser.
30	242 - 256	15	N N	PURCHASER ZIP CODE 242 - 246 Zip code 247 - 250 Zip + 4 code 251 - 256 Filler	Enter zip code of purchaser. Enter 5 digit zip code. Enter 4 digit code if known, else zero fill. Space fill.

25	Illinois Department of Reve
₹	Schedule LA
- 8 /	Allach in Form RMFTALIS

UST and EIF

Page ____ of ___

Fuels Other Than Gasoline Products and Special Fuels Produced, Acquired, Received, or Transported into Illinois

Step 1: Complete the following	lowing information
Gas & Oil Co.	(8)
R-14321	<u>(1)</u>
Reporting period 0 7/2 0 0 0	9)

(26)

Check the receipt type you are listing on this page.

Other fuel products received in Illinois

☐ Other fuel products imported into Minois

Oher feel products produced in your litrois refinery

Step 2: Report your tax- and fee-free purchases

	1 Imake daie (mais, ing yen)	2 Invoke number	3 Name of carrier	4 Marindaga madistranda	5 Product code (see instr.)	6 Name of seller	7 Catgin (city and state)	8 Destination (Minds cites only)	Selecti Selection	10 Includ gallers	
1	07,17,2000	A1443	Shipping Co.	C19677	1-K	Test Oil Co.	Detroit, MI	Chicago	R-12345	11,000	
9	17	18)	31)	20	25	15	29	30	16	22	

Motor Fuel Uniform Schedules Schedule "LA" (ENTRY) Record

					Buildi. 200 I IXED LENGTH
Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '08' - for receiver
			N	3 - 7 Sequence #	Filer license number. (Leading zeroes, if 4 digit license number.)
			N A	8 Code 9 - 17 Filler	Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'LA '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	A	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			Ν	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	Ν	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	Ν	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	SELLER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	SELLER NAME	Name of the seller. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "LA" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

					Buffer: 256 FIXED LENGTH
Field #	Position	Length	Type	Field Description	Remarks
16	94 - 113	20	N	SELLER LICENSE NUMBER 94 - 95 Type	Enter seller license type. '08' - for receiver
			N	96 - 100 Sequence #	Seller license number. (Leading zeroes, if 4 digit license number.)
			N A	101 Code 102 - 113 Filler	Zero fill. Space fill.
17	114 - 119	6	N	114 - 115 Year	Enter a valid date. Enter last 2 digits only. Example: enter year 2000 as '00'.
			N N	116 - 117 Month 118 - 119 Day	01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N	BILL OF LADING DATE 132 - 133 Year	Enter a valid date.
			N N	134 - 135 Month 136 - 137 Day	01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	Ν	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	FILLER	Zero fill.
24	189 - 189	1	Α	STORAGE PERMIT INDICATOR	Space fill.
25	190 - 198	9	Α	PRODUCT CODE	Enter 3 character product code. * If not contained within code table, enter product name.
26	199 - 199	1	A/N	RECEIPT TYPE	Enter schedule gallon type. '1' - Illinois receipts '2' - Imported '3' - Produced
27	200 - 210	11	Α	FILLER	Space fill.
28	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
29	212 - 226	15	Α	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
30	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
31	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.

* PRODUCT CODE -----

AVI - Aviation 1K - Kerosene

\sim	Illinois Department of Revenue
< │	Illinois Department of Revenue Schedule LB Asset to From PMFT6-US
- Q. /	Attach to From DMFT6-US

UST/EIF Exemption for Sales of Aviation Fuels, Kerosene, and Diesel Fuel

Paga	04	
------	----	--

Step 1: Complete the following information	(25)
Test Oil Co. 8	Check the pectual type you are lialing on this page. Diseal tuel acid to relicacie
R-12345 (1) The fames reader Reporting period 0, 7,12 0, 0 0 (9)	Discal fuel acid to qualified shipe, bergue, and venesis Kermene acid to qualified air carriers Arietten fuel acid to qualified air carriers
	14k lenceme and to qualified air carriers

Step 2: Report your exempt sales

1	2	5	4	8	6	7	•
irector date	incico sumber	Normo ci	All of leding or merited number	Nemed purchaser	Airport name	Desilvator (Mirch cilius cris)	invoked
0701 2000	ı CA2435 ı	ABC Trucking	ı BL14589 ı	Deisel Co.	(nates to at contes only)	Quincy"	ı <u>8.00</u> 0
1	01						
(17)	40	\bigcirc		15		20	
<i>لو</i> ايل_	(18)	(30)	(20)	(13)	(20)	(29)	(22)

Motor Fuel Uniform Schedules Schedule "LB" (ENTRY) Record

					Duller: 200 FIXED LENGT
Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type.
			N	3 - 7 Sequence #	'08' - for receiver Filer license number. (Leading zeroes, if 4 digit license number.)
			N A	8 Code 9 - 17 Filler	Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'LB '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	Α	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			N	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	N	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	N	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	PURCHASER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	PURCHASER NAME	Name of the purchaser. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "LB" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

Field #	Position	Length	Туре	Field Description	Remarks
16	94 - 113	20	N N N A	PURCHASER LICENSE NUMBER 94 - 95 Type 96 - 100 Sequence # 101 Code 102 - 113 Filler	Zero fill. Zero fill. Zero fill. Space fill.
17	114 - 119	6	N N N	INVOICE DATE 114 - 115 Year 116 - 117 Month 118 - 119 Day	Enter a valid date. Enter last 2 digits only. Example: enter year 2000 as '00'. 01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N N N	BILL OF LADING DATE 132 - 133 Year 134 - 135 Month 136 - 137 Day	Enter a valid date. 01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	FILLER	Zero fill.
24	189 - 189	1	Α	STORAGE PERMIT INDICATOR	Space fill.
25	190 - 198	9	Α	PRODUCT CODE	Enter 3 character product code. * If not contained within code table, enter product name.
26	199 - 210	12	Α	FILLER	Space fill.
27	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
28	212 - 226	15	Α	AIRPORT NAME	Enter airport name if sold to air carrier. Space fill after carrier, or barge, space fill.
29	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
30	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.

* PRODUCT CODE

-----DSL - Diesel 1K - Kerosene KER - Kerosene AVI - Aviation

25	Illinois Department of Rever
< │	Illinois Department of Rever Schedule LC Alach to Form RMFT-8-US
- Q /	Allach to Form RMFT6US

UST and EIF

Page ____ of ___

Sales and Transfers of Fuels Other Than Gasoline Products and Special Fuels Delivered to Points Outside of Illinois

-	
wing information	<u> </u>
(8)	Check the product type you are listing on this page.
<u>(1)</u>	Aviation fuel
<u></u>	□ 1-k kerosene
9)	☐ Other (specify:)
	wing information 8 1 27 9

Step 2: Report your exported gallons

	1 Indice date (north, day year)	2 Invoke number	3 Name of carrier	4 Hill of lading or marifest number	5 Name of purchaser	Cityle Cityle (Mark dissorty)	7 Desiration (dly and state)	8 Inclusi galani	
1	0801/2000	89B24	BDF Trucking	BL4123	Gas & Oil Co.	Galesburg	St. Louis, MO	4,550	
2	_(17)	(18)	(31)	20	(15)	29	30	(22)	_

Motor Fuel Uniform Schedules Schedule "LC" (ENTRY) Record

					Danci. 200 I IXED ELITATI
Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '08' - for receiver
			N	3 - 7 Sequence #	Filer license number. (Leading zeroes, if
			N A	8 Code 9 - 17 Filler	4 digit license number.) Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'LC '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	Α	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			Ν	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	N	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	N	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	PURCHASER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	PURCHASER NAME	Name of the purchaser. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "LC" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

					Dullel. 230 I IALD LLINGITI
Field #	Position	Length	Type	Field Description	Remarks
16	94 - 113	20	N N N A	PURCHASER LICENSE NUMBER 94 - 95 Type 96 - 100 Sequence # 101 Code 102 - 113 Filler	Zero fill. Zero fill. Zero fill. Space fill.
17	114 - 119	6	N N N	INVOICE DATE 114 - 115 Year 116 - 117 Month 118 - 119 Day	Enter a valid date. Enter last 2 digits only. Example: enter year 2000 as '00'. 01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N N N	BILL OF LADING DATE 132 - 133 Year 134 - 135 Month 136 - 137 Day	Enter a valid date. 01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	FILLER	Zero fill.
24	189 - 189	1	Α	STORAGE PERMIT INDICATOR	Space fill.
25	190 - 198	9	А	PRODUCT CODE	Enter 3 character product code. * If not contained within code table, enter product name.
26	199 - 208	10	Α	FILLER	Space fill.
27	209 - 210	2	Α	EXPORT STATE	Enter valid postal abbreviation for the export state.
28	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
29	212 - 226	15	Α	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
30	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
31	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.

* PRODUCT CODE

1K - Kerosene AVI - Aviation

Schedule L	D Fuels OtherTh	UST and EIF Page of an Gasoline Products and Special Fuels Free to Other Licensed Receivers in Illinois
Step 1: Complete the foll	owing information	25)
Test Oil Co.	<u>(8)</u>	Check the product type you are listing on this page.
R-12345	1	Ariation fuel
Kur kere ander	<u> </u>	🛛 1-k kerosene
Reporting period 0.712000	(9)	☐ Other (specify:

Step 2: Report your tax- and fee-free sales

	1 Invoice dais	2 Invoke	3	4 Marindagar	5	6 Ottob	7 Destroitor	8 Purchasers	5 Invoked	
	(marit, dag year)	number	Name of santer	nadistrante	Name of participan	(Minds other only)	(Maris dies only)	Reme number	galors	
1	07;17;2000	A1244	Trucking Co.	C19578	Gas & Oil Co.	Rock Island	Macomb	R-14321	11,000	
,	(17)	(18)	(30)	(20)	(15)	(28)	(29)	(16)	(22)	_
_					+	-				_

Motor Fuel Uniform Schedules Schedule "LD" (ENTRY) Record

Buffer: 256 FIXED LENGTH Field # **Field Description Position** Length Type Remarks 1 - 17 17 **FILER LICENSE** 1 Enter filer license type. Ν 1 - 2 Type '08' - for receiver Ν 3 - 7 Sequence # Filer license number. (Leading zeroes, if 4 digit license number.) Ν 8 Code Zero fill. Space fill. 9 - 17 Filler Α 3 **IDOR SCHEDULE TYPE** Enter 'LD '. 2 18 - 20 3 21 - 22 2 **FILER PERMIT KIND** Not used by IDOR. Space fill. 23 - 24 2 Ν **FILER LICENSE YEAR** Not used by IDOR. Zero fill. 4 25 - 25 **RECORD TYPE** Entry type. Enter an 'E'. 5 1 Α 26 - 26 **FILING INDICATOR** 6 Α Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data 7 1 FILER PETRODEX INDICATOR Not used by IDOR. Zero fill. 27 - 27 Ν 8 28 - 47 20 A/N **FILER NAME** Complete name of the filer. Space fill after complete name. 9 48 - 51 4 LIABILITY DATE Enter valid date. Ν 48 - 49 Year Enter last 2 digits only. Example: Enter Year 2000 as '00'. Ν 50 - 51 Month 01 - 12. 5 Α **FILLER** Space fill. 10 52 - 56 **CARRIER CODE** 11 57 - 60 4 Α Not used. Space fill. 6 Ν **ORIGIN CODE** Not used. Zero fill. 12 61 - 6613 67 - 72 6 Ν **DESTINATION CODE** Not used. Zero fill. Ν **PURCHASER PETRODEX** Not used by IDOR. Zero fill. 14 73 - 73 1 **INDICATOR PURCHASER NAME** 15 74 - 93 20 A/N Name of the purchaser. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "LD" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

Field #	Position	Length	Туре	Field Description	Remarks
16	94 - 113	20		PURCHASER LICENSE NUMBER	
			N	94 - 95 Type	Enter purchaser license type. '08' - for receiver
			N	96 - 100 Sequence #	Purchaser license number. (Leading zeroes, if 4 digit license number.)
			N A	101 Code 102 - 113 Filler	Zero fill. Space fill.
17	114 - 119	6	N	INVOICE DATE 114 - 115 Year	Enter a valid date. Enter last 2 digits only.
			N N	116 - 117 Month 118 - 119 Day	Example: enter year 2000 as '00'. 01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N.	BILL OF LADING DATE	Enter a valid date.
			N N N	132 - 133 Year 134 - 135 Month 136 - 137 Day	01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	FILLER	Zero fill.
24	189 - 189	1	Α	STORAGE PERMIT INDICATOR	Space fill.
25	190 - 198	9	Α	PRODUCT CODE	Enter 3 character product code. * If not contained within code table, enter product name.
26	199 - 210	12	Α	FILLER	Space fill.
27	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
28	212 - 226	15	Α	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
29	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
30	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.

* PRODUCT CODE

AVI - Aviation

1K - Kerosene



UST and EIF Tax- and Fee-Paid Purchases of the Fuel Types Subject Only to UST/EIF

Рвре	al	F
·		

Step 1: Complete the following information	(25)
Test Oil Co.	Check the product type you are listing on this page.
R-12345 1	
72000	☐ Cyed diesel fuel
Respecting partial 0.7/2 0.0 0 9	Other (specify:)

Step 2: Report your tax- and fee-paid purchases

1 Invoice dair (numls, sing year)	2 Invoke number	3 Name of carrier	4 Hill of halling or maillest number	5 Name of seller	6 Origin (Minols clies only)	7 Desiration (Brok dies only)	8 Seller's Boense manber	5 Involved gallens	
1 07/23/2000	A4413	ABC Trucking	BL145	Aviation Fuel Co.	Carbondale	Sprinafield	R-15432 L	100.000	
2 (17)	(18)	(30)	(20)	(15)	(28)	29)	(16)	(22)	

Motor Fuel Uniform Schedules Schedule "LE" (ENTRY) Record

Field #	Position	Length	Туре	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '08' - for receiver
			N	3 - 7 Sequence #	Filer license number. (Leading zeroes, if
			N A	8 Code 9 - 17 Filler	4 digit license number.) Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'LE '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	Ν	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	A	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			N	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	N	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	N	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	SELLER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	SELLER NAME	Name of the seller. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "LE" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

					Dullel. 230 I IALD LLING I II
Field #	Position	Length	Type	Field Description	Remarks
16	94 - 113	20	N N N	SELLER LICENSE NUMBER 94 - 95 Type 96 - 100 Sequence # 101 Code	Enter seller license type: '08' - for receiver Seller license number. (Leading zeroes, if 4 digit license number.) Zero fill.
17	114 - 119	6	A N N N	102 - 113 Filler INVOICE DATE 114 - 115 Year 116 - 117 Month 118 - 119 Day	Space fill. Enter a valid date. Enter last 2 digits only. Example: enter year 2000 as '00'. 01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N N N	BILL OF LADING DATE 132 - 133 Year 134 - 135 Month 136 - 137 Day	Enter a valid date. 01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	Ν	FILLER	Zero fill.
24	189 - 189	1	Α	FILLER	Space fill.
25	190 - 198	9	А	PRODUCT CODE	Enter 3 character product code. * If not contained within code table, enter product name.
26	199 - 210	12	Α	FILLER	Space fill.
27	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
28	212 - 226	15	А	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
29	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
30	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.

* PRODUCT CODE

1K - Kerosene AVI - Aviation DYE - Dyed Diesel

25	Illinois Department of Revenue
$\langle $	Illinois Department of Revenue Schedule SA
- Q /	AR-ALIC PARTE C PRETEIR

Schedule SA Special Fuel (Excluding Dyed Diesel Fuel)

Atach to From RMFT5 or From RMFT5 US Produced, Acquired, Received, or Transported into Illinois

Step 1: Complete the fo	ini gniwolk	ompation	(25)			
Gas & Oil Co.	(8)	(23) Overly the taxifee type you are listing on this page.	Check the receipt type that you are listing on this page.			
D-04321	1	☐ MFT-free only	Received in Minois			
You know make	$\overline{}$	UST/BF-free only	Imported into Minois			
Reporting period $0.7/2.000$	9	Buth MFT and UST/EF-free	Produced in your Binois refinery			
Step 2: Report your tax- and fee-free purchases						

	1 Invoice daie cuit, du, yeu)	2 Invoke number	3 Name of carrier	4 Bilatingar mailstranter	5 Name of seller	6 Origin (dily and stale)	7 Desiration (Binds offer only)	8 Seliefs Berne number	9 Invokesi gallans	
1 07	7/18/2000	3579	Transport Co.	K2468	Test Oil Co.	Madison, WI	Rockford	D-02345	20,000	
2 _	(17)	(18)	30	20	(15)	(28)	(29)	(16)	(22)	_

Motor Fuel Uniform Schedules Schedule "SA" (ENTRY) Record

Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor '02' - for supplier '08' - for receiver (if '08', must be same as Field 16)
			N	3 - 7 Sequence #	Filer license number. (Leading zeroes, if 4 digit license number.)
			N A	8 Code 9 - 17 Filler	Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'SA '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	A	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			N	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	N	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	N	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	SELLER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	SELLER NAME	Name of the seller. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "SA" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

					Buller: 200 FIXED LENGTH
Field #	Position	Length	Type	Field Description	n Remarks
16	94 - 113	20		SELLER LICENSE I	NUMBER
			N	94 - 95 Type	Enter seller license type: '01' - for distributor '02' - for supplier '08' - for receiver (If '08', must be same as Field 01)
			N	96 - 100 Sequ	ence # Seller license number. (Leading zeroes, if 4 digit license number.)
			N A	101 Code 102 - 113 Filler	Zero fill. Space fill.
17	114 - 119	6	N N	INVOICE DATE 114 - 115 Year 116 - 117 Month	Enter a valid date. Enter last 2 digits only. Example: enter year 2000 as '00'. 01 - 12.
			N	118 - 119 Day	01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N	BILL OF LADING I	Enter a valid date.
			N N	134 - 135 Month 136 - 137 Day	01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	TAX TYPE	Enter tax type 1 - MFT-Free only 2 - UST-/EIF-Free only 3 - Both MFT- and UST-/EIF-Free
24	189 - 198	10	Α	FILLER	Space fill.
25	199 - 199	1	A/N	RECEIPT TYPE	Enter schedule gallon type. '1' - Illinois receipts '2' - Imported '3' - Produced
26	200 - 210	11	Α	FILLER	Space fill.
27	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
28	212 - 226	15	А	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
29	227 - 241	15	Α	DESTINATION NA 227 - 239 City 240 - 241 State	ME Enter destination name. Space fill after complete name.
30	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.

Motor Fuel Tax

Pege



Schedule SB Special Fuel (Excluding Dyad Diesel Fuel) Sold to the Federal Government, Authorized Foreign Diplomats, Municipal Corporations Owning and Operating Local Transportation Systems, to Certain Privately Owned Public Utilities and Non-Recreational Type Watercraft

Step 1: Complete the following information

Сепринулина
Your beauty market

Reporting period

Step 2: Report your nontaxable sales to the federal government, authorized foreign diplomata, etc.

	1 irenise dicie (nasil, day yan)	2 Institutes or market number	5 Name of carrier	4 EM of inding or modified member	6 Name of purchaser	6 Crigin (Binch cilia cnij)	7 Destination (Electric chip)	U Involved gallone
1								
2								

Motor Fuel Uniform Schedules Schedule "SB" (ENTRY) Record

Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor
			N	3 - 7 Sequence #	'02' - for supplier Filer license number. (Leading zeroes, if 4 digit license number.)
			N A	8 Code 9 - 17 Filler	Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'SB '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	Α	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			Ν	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	Ν	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	Ν	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	PURCHASER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	PURCHASER NAME	Name of the purchaser. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "SB" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

Field #	Position	Length	Туре	Field Description	Remarks
16	94 - 113	20	N N N A	PURCHASER LICENSE NUMBER 94 - 95 Type 96 - 100 Sequence # 101 Code 102 - 113 Filler	Zero fill. Zero fill. Zero fill. Space fill.
17	114 - 119	6	N	INVOICE DATE 114 - 115 Year	Enter a valid date. Enter last 2 digits only. Example: enter year 2000 as '00'.
			N N	116 - 117 Month 118 - 119 Day	01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N	BILL OF LADING DATE 132 - 133 Year	Enter a valid date.
			N N	134 - 135 Month 136 - 137 Day	01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	FILLER	Zero fill.
24	189 - 189	1	Α	STORAGE PERMIT INDICATOR	Space fill.
25	190 - 210	21	Α	FILLER	Space fill.
26	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
27	212 - 226	15	А	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
28	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
29	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.

" MFT, UST, and EIF Sales and Transfers of Special Fuel (Excluding Dyed Diesel Fuel) US Delivered to Points Outside of Illinois

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Step 1: Complete the following information

Company (control of the control of
Year leaves sender
Name of a field of the Office
Reporting period

Step 2: Report your exported gallons

	1 Invoke daiz (work, day year)	2 inche number	3 Name of santer	4 Bild tadingar mailet minter	5 Karne of purchaser	6 Crigin (Manis diles criy)	7 Desiration (dly and slate)	e Iwotesi gallare
1								
2								

Motor Fuel Uniform Schedules Schedule "SC" (ENTRY) Record

Buffer: 256 FIXED LENGTH Field # **Position** Length Type Field Description Remarks 1 - 17 **FILER LICENSE** 1 17 Ν 1 - 2 Type Enter filer license type. '01' - for distributor '02' - for supplier '08' - for receiver Ν 3 - 7 Sequence # Filer license number. (Leading zeroes, if 4 digit license number.) Ν 8 Code Zero fill. Α 9 - 17 Filler Space fill. 2 18 - 20 3 Α **IDOR SCHEDULE TYPE** Enter 'SC 3 21 - 22 2 **FILER PERMIT KIND** Not used by IDOR. Space fill. 4 23 - 24 2 Ν **FILER LICENSE YEAR** Not used by IDOR. Zero fill. 5 25 - 25 1 Α **RECORD TYPE** Entry type. Enter an 'E'. 6 26 - 261 Α FILING INDICATOR Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data 7 27 - 27 1 Ν FILER PETRODEX INDICATOR Not used by IDOR. Zero fill. 8 28 - 47 20 A/N **FILER NAME** Complete name of the filer. Space fill after complete name. **LIABILITY DATE** 9 48 - 51 4 Enter valid date. Ν 48 - 49 Year Enter last 2 digits only. Example: Enter Year 2000 as '00'. 50 - 51 Month 01 - 12. Ν 52 - 56 5 **FILLER** Space fill. 10 11 57 - 60 4 Α **CARRIER CODE** Not used. space fill. N **ORIGIN CODE** Not used. Zero fill. 12 61 - 666 Ν **DESTINATION CODE** Not used. Zero fill. 13 67 - 726 73 - 73 **PURCHASER PETRODEX** Not used by IDOR. Zero fill. **INDICATOR PURCHASER NAME** 15 74 - 93 20 A/N Name of the purchaser. Space fill after

complete name.

Motor Fuel Uniform Schedules Schedule "SC" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

Field #	Position	Length	Туре	Field Description	Remarks
16	94 - 113	20	N N N A	PURCHASER LICENSE NUMBER 94 - 95 Type 96 - 100 Sequence # 101 Code 102 - 113 Filler	Zero fill. Zero fill. Zero fill. Space fill.
17	114 - 119	6	N N N	INVOICE DATE 114 - 115 Year 116 - 117 Month 118 - 119 Day	Enter a valid date. Enter last 2 digits only. Example: enter year 2000 as '00'. 01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N N N	BILL OF LADING DATE 132 - 133 Year 134 - 135 Month 136 - 137 Day	Enter a valid date. 01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	FILLER	Zero fill.
24	189 - 189	1	Α	STORAGE PERMIT INDICATOR	Space fill.
25	190 - 208	19	Α	FILLER	Space fill.
26	209 - 210	2	Α	EXPORT STATE	Enter valid postal abbreviation for the export state.
27	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
28	212 - 226	15	Α	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
29	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
30	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.



MFT, UST, and EIF

Special Fuel (Excluding Dyed Diesel Fuel) Sold and Distributed Tax- and Fee-Free in Illinois to Licensed Distributors or Suppliers

Page of	Page	af
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Step 1: Complete the following informat	ion (23)
Test Oil Co. (8)	Check the taxilize type you are listing on this page.
D-02345	☐ MFTfree only
Turkens miles	USF/EIF-free only
Reporting period $0.7/2.000$	☐ Both MFT- and UST/EIF-free

Step 2: Report your tax- and fee-free sales and distributions

	1	2	3	4	5	6	7		9	
	invoice daie (modit, day, year)	invoke number	Name of canter	Hill of halling or marifest number	Name of participan	Crigin (Minois cities crist)	Desiration (Block dies only)	Purchasers Reesse auraber	invokesi gallons	
1	07,18,2000		AB Carrier		Gas & Oil Co.		Morton	D-04321	20,000	
2	(17)	(18)	(28)	(20)	(15)	(26)	(27)	(16)	(22)	_
					$\overline{}$	$\overline{}$	$\overline{}$			_

Motor Fuel Uniform Schedules Schedule "SD" (ENTRY) Record

Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor '02' - for supplier '08' - for receiver (If '08', must be same as Field 16)
			N	3 - 7 Sequence #	Filer license number. (Leading zeroes, if 4 digit license number.)
			N A	8 Code 9 - 17 Filler	Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'SD '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	Ν	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	A	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			N	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	N	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	N	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	PURCHASER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	PURCHASER NAME	Name of the purchaser. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "SD" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

Field #	Position	Length	Type	Field Description	Remarks
16	94 - 113	20	N	PURCHASER LICENSE NUMBE 94 - 95 Type	Enter purchaser license type: '01' - for distributor '02' - for supplier '08' - for receiver
			N N	96 - 100 Sequence #	(If '08', must be same as Field 01) Purchaser license number. (Leading zeroes, if 4 digit license number.) Zero fill.
			Α	102 - 113 Filler	Space fill.
17	114 - 119	6	N	INVOICE DATE 114 - 115 Year	Enter a valid date. Enter last 2 digits only. Example: enter year 2000 as '00'.
			N N	116 - 117 Month 118 - 119 Day	01 - 12. 01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6		BILL OF LADING DATE	Enter a valid date.
			N N N	132 - 133 Year 134 - 135 Month 136 - 137 Day	01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	TAX TYPE	Enter tax type. 1 - MFT-Free only 2 - UST-/EIF-Free only 3 - Both MFT- and UST-/EIF-Free
24	189 - 210	22	Α	FILLER	Space fill.
25	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
26	212 - 226	15	Α	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
27	227 - 241	15	А	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
28	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.



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• 07:10:2000

MFT, UST, and EIF Tax- and Fee-Paid Purchases of Special Fuel (Excluding Dyed Diesel Fuel)

Page of

8,500

(22)

Step 1: Comple	te the following	g information		(25))		
Gas & Oil Co	1	Check the	taolice type you are listing on said only EIF-paid only MFT- and UST/EIF-paid	\sim		e you are listing on luding dyed diesel t	
	your tax- and fi 2 3 kde Nam nber san	ear Blackd	ngar 5	G Crigin (Minds cries only)	7 Desiration (Minds offes only)	8 Selerti Basse sunter	5 Invited gallens

XYZ Oil Co.

Motor Fuel Uniform Schedules Schedule "SE" (ENTRY) Record

K5134

Fuel Carrier Co

Buffer: 256 FIXED LENGTH

(16)

Rock Island Metropolis S-02316

Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor '02' - for supplier '08' - for receiver
			N N	3 - 7 Sequence # 8 Code	(If '08', must be same as Field 16) Filer license number. (Leading zeroes, if 4 digit license number.) Zero fill.
			Α	9 - 17 Filler	Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Enter 'SE '.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter an 'E'.
6	26 - 26	1	A	FILING INDICATOR	Transaction type indicator. 'O' - Original data 'C' - Correction data 'R' - Reversal data 'N' - Negative data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			N	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 60	4	Α	CARRIER CODE	Not used. Space fill.
12	61 - 66	6	N	ORIGIN CODE	Not used. Zero fill.
13	67 - 72	6	N	DESTINATION CODE	Not used. Zero fill.
14	73 - 73	1	N	SELLER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
15	74 - 93	20	A/N	SELLER NAME	Name of the seller. Space fill after complete name.

Motor Fuel Uniform Schedules Schedule "SE" (ENTRY) Record (continued) Buffer: 256 FIXED LENGTH

					Butter: 256 FIXED LENGTH
Field #	Position	Length	Type	Field Description	Remarks
16	94 - 113	20	N	SELLER LICENSE NUMBER 94 - 95 Type	Enter seller license type: '01' - for distributor '02' - for supplier '08' - for receiver
			N N A	96 - 100 Sequence # 101 Code 102 - 113 Filler	(If '08', must be same as Field 01) Seller license number. (Leading zeroes, if 4 digit license number.) Zero fill. Space fill.
17	114 - 119	6	N N	INVOICE DATE 114 - 115 Year 116 - 117 Month	Enter a valid date. Enter last 2 digits only. Example: enter year 2000 as '00'. 01 - 12.
			N	118 - 119 Day	01 - 31.
18	120 - 131	12	A/N	INVOICE NUMBER	Enter an invoice number. Required field. No leading zeroes. Space fill at end.
19	132 - 137	6	N N N	BILL OF LADING DATE 132 - 133 Year 134 - 135 Month 136 - 137 Day	Enter a valid date. 01 - 12. 01 - 31.
20	138 - 147	10	A/N	BILL OF LADING	Enter bill of lading or manifest number. No leading zeroes. Space fill at end.
21	148 - 177	30	N	FILLER	Not used by IDOR. Zero fill.
22	178 - 187	10	N	NET GALLONS	Invoiced gallons. Format 9 (9) V9. See instructions on Page 7.
23	188 - 188	1	N	TAX TYPE	Enter tax type. 1 - MFT-Paid only 2 - UST-/EIF-Paid only 3 - Both MFT- and UST-/EIF-Paid
24	189 - 189	1	Α	STORAGE PERMIT INDICATOR	Space fill.
25	190 - 198	9	Α	PRODUCT CODE	Enter 3 character product code. * If not contained within code table, enter product name.
26	199 - 210	12	Α	FILLER	Space fill.
27	211 - 211	1	Α	MEDIA CODE	Enter 'D' for diskette.
28	212 - 226	15	Α	ORIGIN NAME 212 - 224 City 225 - 226 State	Enter origin name. Space fill after complete name.
29	227 - 241	15	Α	DESTINATION NAME 227 - 239 City 240 - 241 State	Enter destination name. Space fill after complete name.
30	242 - 256	15	Α	CARRIER NAME	Enter carrier name. Space fill after complete name.

* PRODUCT CODE

SPF - Special fuel (excluding dyed diesel)

1K - Kerosene

Motor Fuel Uniform Schedules Total "S" (SCHEDULE TOTAL) Record

Buffer: 256 FIXED LENGTH Field # **Position** Length Type Field Description Remarks 1 1 - 17 17 **FILER LICENSE** Ν 1 - 2 Type Enter filer license type. '01' - for distributor '02' - for supplier '08' - for receiver 3 - 7 Sequence # Filer license number. (Leading zeroes, if Ν 4 digit license number.) Zero fill. Ν 8 Code 9 - 17 Filler Space fill. Α 2 18 - 20 3 Α **IDOR SCHEDULE TYPE** Enter schedule type being totalled. 2 3 21 - 22 Α FILER PERMIT KIND Not used by IDOR. Space fill. 2 Ν **FILER LICENSE YEAR** Not used by IDOR. Zero fill. 4 23 - 24 5 25 - 25 1 Α **RECORD TYPE** Entry type. Enter an 'S' for schedule type total record. 6 26 - 26 FILING INDICATOR Transaction type indicator. 'O' - Original data 7 27 - 27 1 Ν FILER PETRODEX INDICATOR Not used by IDOR. Zero fill. 20 A/N **FILER NAME** 8 28 - 47 Complete name of the filer. Space fill after complete name. 9 48 - 51 4 LIABILITY DATE Enter valid date. 48 - 49 Year Ν Enter last 2 digits only. Example: Enter Year 2000 as '00'. Ν 50 - 51 Month 01 - 12. 10 52 - 56 5 Α **FILLER** Space fill. 11 57 - 71 15 Ν **FILLER** Not used by IDOR. Zero fill. 72 - 8615 Ν **FILLER** Not used by IDOR. Zero fill. 12 87 - 101 Ν **FILLER** Not used by IDOR. Zero fill. 13 15 14 102 - 116 15 Ν SCHEDULE NET GALLONS Total invoiced gallons from the specified schedule type. Format 9 (14) V9. See instructions on Page 7. 117 - 126 10 Α **FILLER** Space fill. 15 127 - 136 10 Ν **TOTAL ORIGINAL ENTRIES** Total of all original entry records for this 16 schedule type. TOTAL CORRECTION ENTRIES Total of all correction entry records for this 137 - 146 10 Ν 17 schedule type. 18 147 - 156 10 Ν **TOTAL REVERSAL ENTRIES** Total of all reversal entry records for this schedule type. 157 - 166 10 Ν **TOTAL NEGATIVE ENTRIES** Total of all negative entry records for this 19 schedule type. **FILLER** 20 167 - 256 90 Α Space fill.

Motor Fuel Uniform Schedules Total "V" (LICENSE TOTAL) Record Buffer: 256 FIXED LENGTH

					Buffer: 256 FIXED LENGTH
Field #	Position	Length	Type	Field Description	Remarks
1	1 - 17	17	N	FILER LICENSE 1 - 2 Type	Enter filer license type. '01' - for distributor '02' - for supplier
			N	3 - 7 Sequence #	'08' - for receiver Filer license number. (Leading zeroes, if 4 digit license number.)
			N A	8 Code 9 - 17 Filler	Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Space fill.
3	21 - 22	2	Α	FILER PERMIT KIND	Not used by IDOR. Space fill.
4	23 - 24	2	N	FILER LICENSE YEAR	Not used by IDOR. Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter a 'V' for license total record.
6	26 - 26	1	Α	FILING INDICATOR	Transaction type indicator. 'O' - Original data
7	27 - 27	1	Ν	FILER PETRODEX INDICATOR	Not used by IDOR. Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
		_	N	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 71	15	N	FILLER	Not used by IDOR. Zero fill.
12	72 - 86	15	N	FILLER	Not used by IDOR. Zero fill.
13	87 - 101	15	N	FILLER	Not used by IDOR. Zero fill.
14	102 - 116	15	N	LICENSE NET GALLONS	Total invoiced gallons from all schedules for this license. Format 9 (14) V9. See instructions on Page 7.
15	117 - 126	10	Α	FILLER	Space fill.
16	127 - 136	10	N	TOTAL ORIGINAL ENTRIES	Total of all original entry records for this license.
17	137 - 146	10	N	TOTAL CORRECTION ENTRIES	Total of all correction entry records for this license.
18	147 - 156	10	N	TOTAL REVERSAL ENTRIES	Total of all reversal entry records for this license.
19	157 - 166	10	N	TOTAL NEGATIVE ENTRIES	Total of all negative entry records for this license.
20	167 - 256	90	Α	FILLER	Space fill.

Motor Fuel Uniform Schedules Total "Z" (FILE TOTAL) Record

Field #	Position	Length	Tyne	Field Description	Remarks
		•	Type	•	Hemarks
1	1 - 17	17	N A	FILER LICENSE 1 - 8 Filer License 9 - 17 Filler	Zero fill. Space fill.
2	18 - 20	3	Α	IDOR SCHEDULE TYPE	Space fill.
3	21 - 22	2	Α	FILER PERMIT KIND	Space fill.
4	23 - 24	2	Ν	FILER LICENSE YEAR	Zero fill.
5	25 - 25	1	Α	RECORD TYPE	Entry type. Enter a 'Z' for file total record.
6	26 - 26	1	Α	FILING INDICATOR	Transaction type indicator. 'O' - Original data
7	27 - 27	1	N	FILER PETRODEX INDICATOR	Zero fill.
8	28 - 47	20	A/N	FILER NAME	Complete name of the filer. Space fill after complete name.
9	48 - 51	4	N	LIABILITY DATE 48 - 49 Year	Enter valid date. Enter last 2 digits only. Example: Enter Year 2000 as '00'.
			N	50 - 51 Month	01 - 12.
10	52 - 56	5	Α	FILLER	Space fill.
11	57 - 71	15	Ν	FILLER	Zero fill.
12	72 - 86	15	Ν	FILLER	Not used by IDOR. Zero fill.
13	87 - 101	15	Ν	FILLER	Not used by IDOR. Zero fill.
14	102 - 116	15	N	FILE NET GALLONS	Total invoiced gallons from all schedules on the file. Format 9(14) V9. See instructions on Page 7.
15	117 - 126	10	Α	FILLER	Space fill.
16	127 - 136	10	N	TOTAL ORIGINAL ENTRIES	Total of all original entry records for this file.
17	137 - 146	10	Ν	TOTAL CORRECTION ENTRIES	Total of all correction entry records for this file.
18	147 - 156	10	Ν	TOTAL REVERSAL ENTRIES	Total of all reversal entry records for this file.
19	157 - 166	10	Ν	TOTAL NEGATIVE ENTRIES	Total of all negative entry records for this file.
20	167 - 256	90	Α	FILLER	Space fill.



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