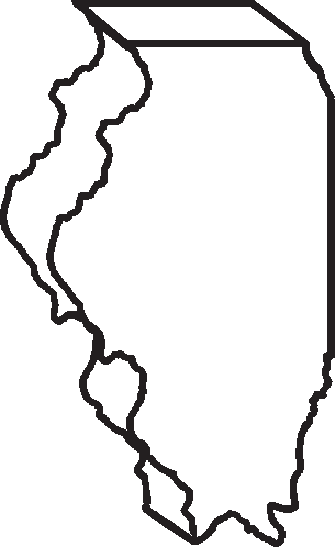
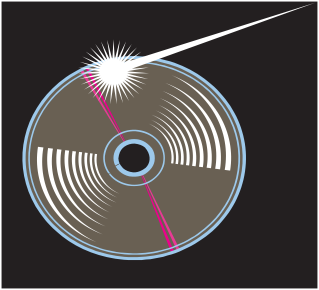
**Illinois Department of Revenue**

RMFT-?? (N-03/08)

IL-492-???? Motor Fuel Reporting - Magnetic Media FiIing Formats Page 1

R-2/09



***Magnetic Media Filing Formats for***

***Motor Fuel Reporting***

*Compact Disc*

*3.5 Diskette*

*Motor Fuel Compliance Review*

*& Licensing Section*

*217 782-2291*

Page 2 Motor Fuel Reporting - Magnetic Media FiIing Formats

R-2/09

***Table of Contents***

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[Data Records Explanation 6](#_TOC_250000)

Gen. Infor. , Record Layouts and Sch. , Data Fields, Gallon Fields, and Contact Information 7

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.

1. **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.)

1. **Seller’s License Number,** positions 94 - 113:

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

1. **Seller’s Name,** positions 74 - 93:

Record 1 - Enter “XFER TO SCHED M” Record 2 - Enter “XFER FR SCHED M”

1. **Invoice Date,** positions 114 - 119:

**BOL Date,** positions 132 - 137:

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

1. **Tax Type,** position 188:

Both records - Enter a “3” into both fields.

1. **Receipt Type,** position 199:

Both records - Enter a “1” into both fields.

1. **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.

1**9** The filing agent must adhere to all IDOR diskette requirements and specifications.

1. Do not submit returns and/or remittance with your magnetic media. Continue to send returns to the address indicated on the return form.
2. 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 Name: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Filing Agent Address: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Filing Agent City, State, Zip: XXXXXXXXXXXXXXXXXXXX XX XXXXX Filing Agent Phone: (999) 999-9999

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

Filer’s Name: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Filer’s License: X - 99999

Number of MUST

License Schedule Transactions APPEAR

09999 A 99,999 FOR

C 999 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.

1. 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

* 1. 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.

1. 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.
2. 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.
3. 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)

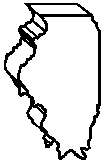
Write us at: **MOTOR FUEL COMPLIANCE REVIEW AND LICENSING SECTION ILLINOIS DEPARTMENT OF REVENUE**

**P O BOX 19477 SPRINGFIELD IL 62794-9477**

For technical help: **217 785-6744**

(Diskettes)

**Illinois Department of Revenue MFT, UST, and EIF**



**Schedule A Gasoline Products Produced, Acquired,**

Attach to Form RMFT-5 or Form RMFT-5-US **Received, or Transported into Illinois**

**Step 1: Complete the following information**

Page

of

Gas & Oil Co. **8**

Company name

D-04321 **1**

Check the tax/fee type you are listing on this page.

MFT-free only

**26** Check the receipt type that you are listing on this page.

x Gasoline products received in Illinois

Your license number UST-/EIF-free only Gasoline products imported into Illinois

Reporting period 0 7/ 2 0 0 0

Month Year

**9 23**

X Both MFT- and UST-/EIF-free Gasoline products produced in your Illinois refinery

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

**1 2 3 4 5 6 7 8 9**

Invoice date Invoice Name of Bill of lading or Origin Destination Seller’s Invoiced

(month, day, year) number carrier manifest number Name of seller (city and state) (Illinois cities only) license number gallons

**1** \_0 \_7/1\_ 7\_/2\_ 0\_ 0\_ 0\_

**2** \_ \_**1**/\_ **7**\_/\_ \_ \_ \_

A1234 AB Trucking B5678 Test Oil Co. Chicago, IL Springfield D-02345 15,000

#### 18 31 20 15 29 30 16 22

**Motor Fuel Uniform Schedules**

**Schedule “A” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

**Field # Position Length Type Field Description Remarks**

1 1 - 17 17 **FILER LICENSE**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| N | | | | 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 | | | | 8 | Code | Zero fill. |
| 2 | 18 - 20 | 3 | A  A | 9 - 17 Filler  **IDOR SCHEDULE TYPE** | | Space fill.  Enter ‘A ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

## Schedule “A” (ENTRY) Record (continued)

**Buffer: 256 FIXED LENGTH**

‘1’ - Illinois receipts ‘2’ - Imported

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  16 | **Position**  94 - 113 | **Length**  20 | **Type** | **Field Description**  **SELLER LICENSE NUMBER** | **Remarks**  Enter seller license type. |
|  |  |  | N  N N | 94 - 95 Type  96 - 100 Sequence  101 Code | ‘01’ - for distributor ‘08’ - for receiver  (If ‘08’ , must be same as field 01)  Seller license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 102 - 113 Filler | 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 | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 - 189 | 1 | A | **STORAGE PERMIT INDICATOR** | Space fill. |
| 25 | 190 - 198 | 9 | A | **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. |

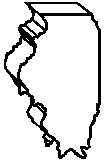
‘3’ - Produced

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 27 | 200 - 210 | 11 | A | **FILLER** | Space fill. |
| 28 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 29 | 212 - 226 | 15 | A | **ORIGIN NAME**  212 - 224 City  225 - 226 State | Enter origin name. Space fill after complete name. |
| 30 | 227 - 241 | 15 | A | **DESTINATION NAME**  227 - 239 City  240 - 241 State | Enter destination name. Space fill after complete name. |
| 31 | 242 - 256 | 15 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete name. |

\* PRODUCT CODE

------------------------------ GAS - GASOLINE

**Illinois Department of Revenue**



**Motor Fuel Tax**

**Schedule B**

**Gasoline Products Sold to the Federal Government, Authorized Foreign Diplomats,**

Page of

**Municipal Corporations Owning and Operating Local Transportation Systems, to Certain**

Attach to Form RMFT-5 **Privately Owned Public Utilities, Non-Recreational Type Watercraft, or for Aviation Purposes**

**Step 1: Complete the following information**

#### 8

##### Gas & Oil Co.

Company name

D-04321 **1**

Your license number

Reporting period 0 7 / 2 0 0 0 **9**

Month Year

**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** 0\_7\_1/\_8\_/2\_ 0\_0\_0\_ | C15643 | XZ Transport | A19565 | Test Oil Co. | Moline | Rock Island | 9,500 |
| **2** \_ \_/\_**1**\_**7**/\_ \_ \_ \_ | **18** | **30** | **20** | **15** | **28** | **29** | **22** |

# Motor Fuel Uniform Schedules

## Schedule “B” (ENTRY) Record

**Buffer: 256 FIXED LENGTH**

**‘O’** - Original data **‘C’** - Correction data **‘R’** - Reversal data **‘N’** - Negative data

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N N  N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type. ‘01’ - for distributor  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Enter ‘B ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **RECORD TYPE** | Entry type. Enter an ‘E’. |
| 6 | 26 - 26 | 1 | A | **FILING INDICATOR** | Transaction type indicator. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

**Schedule “B” (ENTRY) Record (continued)**

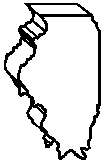
**Buffer: 256 FIXED LENGTH**

\* PRODUCT CODE

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  16 | **Position**  94 - 113 | **Length**  20 | **Type** | **Field Description**  **PURCHASER LICENSE NUMBER** | **Remarks** |
|  |  |  | N N N A | 94 - 95 Type  96 - 100 Sequence #   1. Code 2. - 113 Filler | Zero fill. Zero fill. 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 | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **STORAGE PERMIT INDICATOR** | Space fill. |
| 25 | 190 - 198 | 9 | A | **PRODUCT CODE** | Enter 3 character product code. \* If not contained within code table, enter product name. |
| 26 | 199 - 210 | 12 | A | **FILLER** | Space fill. |
| 27 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 28 | 212 - 226 | 15 | A | **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 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete name. |

------------------------------ GAS - GASOLINE

**Schedule C Sales and Transfers of Gasoline Products**



Attach to Form RMFT-5 or Form RMFT-5-US **Delivered to Points Outside of Illinois**

**Step 1: Complete the following information**

#### 8

##### Gas & Oil Co.

Company name

D-04321 **1**

Your license number

MO **27**

Name of state into which shipments were made

Reporting period 0 7 /2 0 0 0 **9**

Month Year

**Step 2: Report your exported gallons**

**1 2 3 4 5 6 7 8**

Invoice date Invoice Name of Bill of lading or Origin Destination Invoiced

(month, day, year) number carrier manifest number Name of purchaser (Illinois cities only) (city and state) gallons

**1** \_0\_7/2\_ 0\_/\_2\_0\_00\_

169877 ABC Trucking B165544 Test Oil Co. Springfield St. Louis, MO 8,800

#### 17 18 31 20 15 29 30 22

**Motor Fuel Uniform Schedules**

**Schedule “C” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

**‘O’** - Original data **‘C’** - Correction data **‘R’** - Reversal data **‘N’** - Negative data

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N  N N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type. ‘01’ - for distributor ‘08’ - for receiver  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Enter ‘C ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **RECORD TYPE** | Entry type. Enter an ‘E’. |
| 6 | 26 - 26 | 1 | A | **FILING INDICATOR** | Transaction type indicator. |

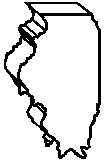
|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 7 | 27 - 27 | 1 | N | **FILER PETRODEX INDICATOR** | Not used by IDOR. Zero fill. |
| 8 | 28 - 47 | 20 | A/N | **FILER NAME** | Complete name of the filer. Space fill after complete name. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 16 | 94 - 113 | 20 | N N N A | **PURCHASER LICENSE NUMBER**  94 - 95 Type  96 - 100 Sequence #   1. Code 2. - 113 Filler | Zero fill. Zero fill. 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 | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **STORAGE PERMIT INDICATOR** | Space fill. |
| 25 | 190 - 198 | 9 | A | **PRODUCT CODE** | Enter 3 character product code. \* If not contained within code table, enter product name. |
| 26 | 199 - 208 | 10 | A | **FILLER** | Space fill. |
| 27 | 209 - 210 | 2 | A | **EXPORT STATE** | Enter valid postal abbreviation for the export state. |
| 28 | 211-211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 29 | 212 - 226 | 15 | A | **ORIGIN NAME**  212 - 224 City  225 - 226 State | Enter origin name. Space fill after complete name. |
| 30 | 227 - 241 | 15 | A | **DESTINATION NAME**  227 - 239 City  240 - 241 State | Enter destination name. Space fill after complete name. |
| 31 | 242 - 256 | 15 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete name. |

\* PRODUCT CODE

------------------------------ GAS - GASOLINE

**Schedule D Gasoline Products Sold and Distributed Tax- and Fee-Free**



Attach to Form RMFT-5 or Form RMFT-5-US **in Illinois to Licensed Distributors and Receivers**

**Step 1: Complete the following information**

#### 8

##### Test Oil Co.

Company name

D-02345 **1**

Check the tax/fee type you are listing on this page.

**23** x MFT-free only

Your license number UST-/EIF-free only

Reporting period 0 7 /2 0 0 0 **9**

Month Year

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 Invoice Name of Bill of lading or Origin Destination Purchaser’s Invoiced

(month, day, year) number carrier manifest number Name of purchaser (Illinois cities only) (Illinois cities only) license number gallons

**1** 0\_ 7\_/\_1\_7/\_2\_0\_0\_0 A1234 XT Transport B5678 Gas & Oil Co. Joliet Lincoln D-04321 15,000

**17 18 30 20 15 28 29 16 22**

**Motor Fuel Uniform Schedules**

**Schedule “D” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

**Field # Position Length Type Field Description Remarks**

1 1 - 17 17 **FILER LICENSE**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| N | | | | 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 | | | | 8 | Code | Zero fill. |
| 2 | 18 - 20 | 3 | A  A | 9 - 17 Filler  **IDOR SCHEDULE TYPE** | | Space fill.  Enter ‘D ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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. |

## Schedule “D” (ENTRY) Record (continued)

**Buffer: 256 FIXED LENGTH**

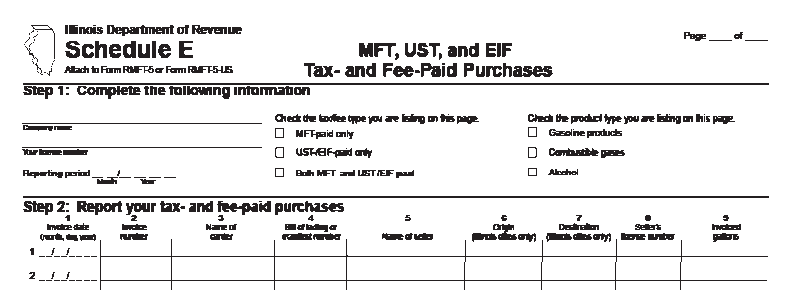
**Field # Position Length Type Field Description Remarks**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 16 | 94 - 113 | 20 | N | **PURCHASER LICENSE NUMBER**  94 - 95 Type | Enter purchaser license type: |
|  |  |  | N N | 96 - 100 Sequence #  101 Code | ‘01’ - for distributor ‘08’ - for receiver  (If ‘08’, must be same as field 01) Purchaser license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 102 - 113 Filler | 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 | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 - 189 | 1 | A | **STORAGE PERMIT INDICATOR** | Space fill. |
| 25 | 190 - 198 | 9 | A | **PRODUCT CODE** | Enter 3 character product code. \*  If not contained within code table, enter product name. |
| 26 | 199 - 210 | 12 | A | **FILLER** | Space fill. |
| 27 | 211-211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 28 | 212 - 226 | 15 | A | **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 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete name. |

\* PRODUCT CODE

------------------------------ GAS - GASOLINE

**25**



|  |  |
| --- | --- |
|  | **23** |
| **9** | X |

Gas & Oil Co. **8**

D-04321 **1** x

07 2 0 0 0

0720 2000 B1234 AZ Trucking L98765 Test Oil Co. Chicago Peoria D-02045 4,000

**17 18 30 20 15 28 29 16 22**

**Motor Fuel Uniform Schedules**

**Schedule “E” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

**Field # Position Length Type Field Description Remarks**

1 1 - 17 17 **FILER LICENSE**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| N | | | | 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 | | | | 8 | Code | Zero fill. |
| 2 | 18 - 20 | 3 | A  A | 9 - 17 Filler  **IDOR SCHEDULE TYPE** | | Space fill.  Enter ‘E ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

## Schedule “E” (ENTRY) Record (continued)

**Buffer: 256 FIXED LENGTH**

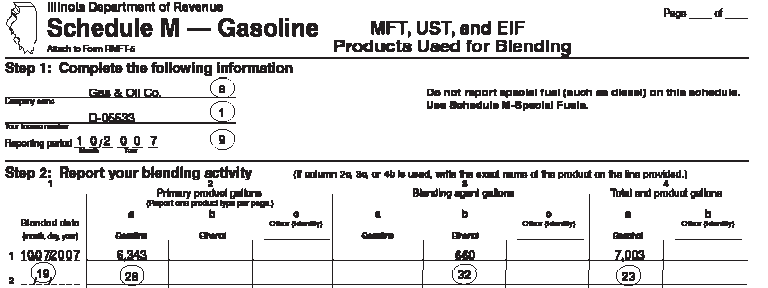
**Field # Position Length Type Field Description Remarks**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 16 | 94 - 113 | 20 | | **SELLER LICENSE NUMBER** | | |
| N | | | | 94 - 95 | Type | Enter seller license type: ‘01’ - for distributor |
|  |  |  | |  |  | ‘08’ - for receiver |
|  |  |  | N N | 96 - 100 Sequence #  101 Code | | (If ‘08’, must be same as field 01)  Seller license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 102 - 113 Filler | | 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 | 134 - 135 Month | | 01 - 12. |
|  |  |  | N | 136 - 137 Day | | 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 | A | **FILLER** | | Space fill. |
| 25 | 190 - 198 | 9 | A | **PRODUCT CODE** | | Enter 3 character product code. \*  If not contained within code table, enter product name. |
| 26 | 199 - 210 | 12 | A | **FILLER** | | Space fill. |
| 27 | 211-211 | 1 | A | **MEDIA CODE** | | Enter ‘D’ for diskette. |
| 28 | 212 - 226 | 15 | A | **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 | A | **CARRIER NAME** | | Enter carrier name. Space fill after complete name. |

* PRODUCT CODE

------------------------------ GAS - GASOLINE ALC - ALCOHOL

CNG - COMBUSTIBLE GASES



# Motor Fuel Uniform Schedules

## Schedule “M” - Gasoline (ENTRY) Record

**Buffer: 256 FIXED LENGTH**

**‘O’** - Original data **‘C’** - Correction data **‘R’** - Reversal data **‘N’** - Negative data

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N  N N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type. ‘01’ - for distributor  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Enter ‘MG ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **RECORD TYPE** | Entry type. Enter an ‘E’. |
| 6 | 26 - 26 | 1 | A | **FILING INDICATOR** | Transaction type indicator. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

**Schedule “M” - Gasoline (ENTRY) Record (continued)**

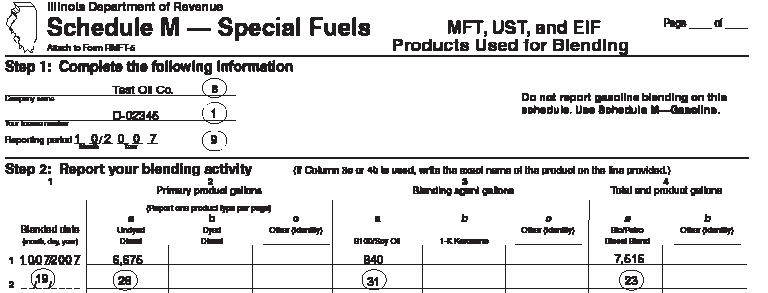
**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  16 | **Position**  94 - 113 | **Length**  20 | **Type** | **Field Description**  **PURCHASER LICENSE NUMBER** | **Remarks** |
|  |  |  | N N N A | 94 - 95 Type  96 - 100 Sequence #   1. Code 2. - 113 Filler | Zero fill. Zero fill. Zero fill. Space fill. |
| 17 | 114 - 119 | 6 | N | **INVOICE DATE** | Zero fill. |
| 18 | 120 - 131 | 12 | A | **INVOICE NUMBER** | Space fill. |
| 19 | 132 - 137 | 6 | N | **BLENDING DATE**  132 - 133 Year | Enter a valid date. Enter last 2 digits only. |
|  |  |  | N | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 01 - 31. |
| 20 | 138 - 146 | 9 | A | **END PRODUCT CODE** | Enter 3 character product code. \*\*\*  If not contained within code table, enter product name. |
| 21 | 147 - 147 | 1 | A | **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 | A | **FILLER** | Space fill. |
| 26 | 190 - 198 | 9 | A | **PRIMARY PRODUCT CODE** | Enter 3 character product code. \*\*\*  If not contained within code table, enter product name. |
| 27 | 199 - 199 | 1 | A | **FILLER** | Space fill. |
| 28 | 200 - 209 | 10 | N | **PRIMARY PRODUCT GALLONS** | Primary product gallons. Format 9(9)V9 |
| 29 | 210 - 210 | 1 | A | **FILLER** | Space fill. |
| 30 | 211 - 211 | 1 | A | **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 | A | **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 | A | **FILLER** | Space fill. |

\* PRODUCT CODE

------------------------------ GAS - GASOLINE

ETH - ETHANOL/ALCOHOL GHL - GASOHOL



# Motor Fuel Uniform Schedules

## Schedule “M” - Special Fuels (ENTRY) Record

**Buffer: 256 FIXED LENGTH**

**‘O’** - Original data **‘C’** - Correction data **‘R’** - Reversal data **‘N’** - Negative data

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N  N N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type. ‘01’ - for distributor ‘02’ - for supplier  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Enter ‘MS ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **RECORD TYPE** | Entry type. Enter an ‘E’. |
| 6 | 26 - 26 | 1 | A | **FILING INDICATOR** | Transaction type indicator. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

**Schedule “M” - Special Fuels (ENTRY) Record (continued)**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  16 | **Position**  94 - 113 | **Length**  20 | **Type** | **Field Description**  **PURCHASER LICENSE NUMBER** | **Remarks** |
|  |  |  | N N N A | 94 - 95 Type  96 - 100 Sequence #   1. Code 2. - 113 Filler | Zero fill. Zero fill. Zero fill. Space fill. |
| 17 | 114 - 119 | 6 | N | **INVOICE DATE** | Zero fill. |
| 18 | 120 - 131 | 12 | A | **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 | A | **END PRODUCT CODE** | Enter 3 character product code. \*\*\*  If not contained within code table, enter product name. |
| 21 | 147 - 147 | 1 | A | **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 | A | **FILLER** | Space fill. |
| 26 | 190 - 198 | 9 | A | **PRIMARY PRODUCT CODE** | Enter 3 character product code. \*\*\*  If not contained within code table, enter product name. |
| 27 | 199 - 199 | 1 | A | **FILLER** | Space fill. |
| 28 | 200 - 209 | 10 | N | **PRIMARY PRODUCT GALLONS** | Primary product gallons. Format 9(9)V9 |
| 29 | 210 - 210 | 1 | A | **FILLER** | Space fill. |
| 30 | 211 - 211 | 1 | A | **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 | A | **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 | A | **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

#### 1 25

Test Oil Co.

D-02345 x

0 7 2 0 0 0

**9**

#### 17 18 30 20 15 28 29 16 22

0720 2000 B7890 Transport Co. L98765 Gas & Oil Co. Springfield Springfield D-04321 7,450

**Motor Fuel Uniform Schedules**

**Schedule “GA-1” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N  N N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type. ‘01’ - for distributor ‘02’ - for supplier  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Enter ‘GA1‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

**Schedule “GA-1” (ENTRY) Record (continued)**

**Buffer: 256 FIXED LENGTH**

**Field # Position Length Type Field Description Remarks**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 16 | 94 - 113 | 20 |  | **PURCHASER LICENSE NUMBER** |  |
|  |  |  | A/N | 94 - 95 Type | Enter purchaser license type: |

‘01’ - for distributor ‘02’ - for supplier ‘RO’- for retail outlet

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | | N  N A | 96 - 100 Sequence #   1. Code 2. - 113 Filler | Purchaser license number. (Leading zeroes, if 4 digit license number.) If ‘RO’, enter zeroes. 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 | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **STORAGE PERMIT INDICATOR** | Space fill. |
| 25 | 190 - 198 | 9 | A | **PRODUCT CODE** | Enter 3 character product code. \*  If not contained within code table, enter product name. |
| 26 | 199 - 210 | 12 | A | **FILLER** | Space fill. |
| 27 | 211-211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 28 | 212 - 226 | 15 | A | **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 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete name. |

* PRODUCT CODE

------------------------------

LPG - LIQUID PROPANE GAS 1K - KEROSENE

ALC - ALCOHOL

**1 25**

D-04321 x

0 7 2 0 0 0 x

**9**

**23**

**17 18 30 20 15 28**

0718 2000 3579 Transport Co. K2468 Test Oil Co. Madison, WI Rockford D-02345 20,000

**29 16 22**

**Motor Fuel Uniform Schedules**

Gas & Oil Co.

**Schedule “DA” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

**Field # Position Length Type Field Description Remarks**

1 1 - 17 17 **FILER LICENSE**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| N | | | | 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 | | | | 8 | Code | Zero fill. |
| 2 | 18 - 20 | 3 | A  A | 9 - 17 Filler  **IDOR SCHEDULE TYPE** | | Space fill.  Enter ‘DA ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 |  | **LIABILITY DATE** | Enter valid date. |
|  |  |  | N | 48 - 49 Year | Enter last 2 digits only. |
|  |  |  |  |  | Example: Enter Year 2000 as ‘00’. |
|  |  |  | N | 50 - 51 Month | 01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

## Schedule “DA” (ENTRY) Record (continued)

**Buffer: 256 FIXED LENGTH**

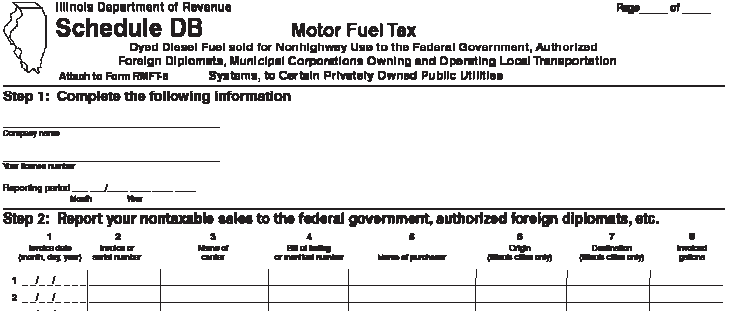
**Field # Position Length Type Field Description Remarks**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 16 | 94 - 113 | 20 | | **SELLER LICENSE NUMBER** | | |
| N | | | | 94 - 95 | Type | Enter seller license type: ‘01’ - for distributor |
|  |  |  | |  |  | ‘02’ - for supplier ‘08’ - for receiver |
|  |  |  | N N | 96 - 100 Sequence #  101 Code | | (If ‘08’, must be same as field 01)  Seller license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 102 - 113 Filler | | 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 | 134 - 135 Month | | 01 - 12. |
|  |  |  | N | 136 - 137 Day | | 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 | A | **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 | A | **FILLER** | Space fill. |
| 27 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 28 | 212 - 226 | 15 | A | **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 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete name. |



Gas & Oil Co. **8**

S-04321 **1**

**9**

##### 0 7 2 0 0 0

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 0717 2000 12356 | Carrier Co. | B9750 | ABX Mass Transit |  | Morris |  | Monmouth 15,000 |
| **17 18** | **29** | **20** | **15** | **27** |  | **28** | **22** |

**Motor Fuel Uniform Schedules**

**Schedule “DB” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N  N N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type. ‘01’ - for distributor ‘02’ - for supplier  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Enter ‘DB ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

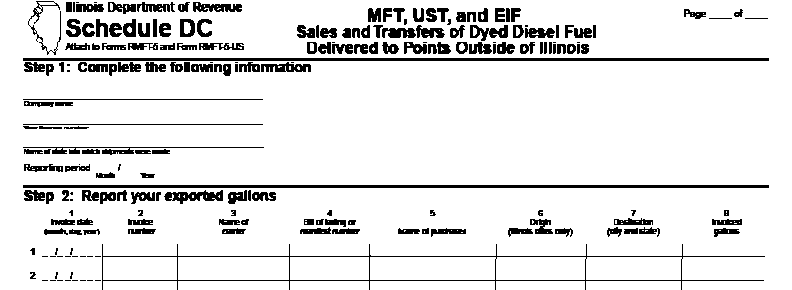
## Schedule “DB” (ENTRY) Record (continued)

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  15 | **Position**  74 - 93 | **Length**  20 | **Type**  A/N | **Field Description**  **PURCHASER NAME** | **Remarks**  Name of the purchaser. Space fill after |
|  |  |  |  |  | complete name. |
| 16 | 94 - 113 | 20 | N | **PURCHASER LICENSE NUMBER**  94 - 95 Type | Zero fill. |
|  |  |  | N N A | 96 - 100 Sequence #   1. Code 2. - 113 Filler | Zero fill. 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 | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **STORAGE PERMIT INDICATOR** | Space fill. |
| 25 | 190 - 210 | 21 | A | **FILLER** | Space fill. |
| 26 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 27 | 212 - 226 | 15 | A | **ORIGIN NAME**  212 - 224 City  225 - 226 State | Enter origin name. Space fill after complete name. |
| 28 | 227 - 241 | 15 | A | **DESTINATION NAME**  227 - 239 City  240 - 241 State | Enter destination name. Space fill after complete name. |
| 29 | 242 - 256 | 15 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete name. |

Gas & Oil Co. **8**

D-04321 **1**



**Motor Fuel Uniform Schedules**

MO **26**

0 7 2 0 0 0 **9**

07162000 9531 Transport, Inc. B6930 Test Oil Co. Springfield St. Louis, MO 9,000

**17 18 30 20 15 28 29 22**

**Schedule “DC” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

**Field # Position Length Type Field Description Remarks**

1 1 - 17 17 **FILER LICENSE**

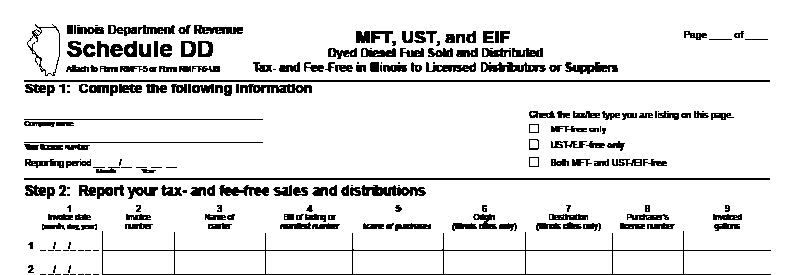
|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| N | | | | 1 - 2 | Type | Enter filer license type. |
|  | | | |  |  | ‘01’ - for distributor |
|  | | | |  |  | ‘02’ - for supplier |
|  | | | |  |  | ‘08’ - for receiver |
| N | | | | 3 - 7 | Sequence # | Filer license number. (Leading zeroes, if |
|  | | | |  |  | 4 digit license number.) |
| N | | | | 8 | Code | Zero fill. |
| A | | | | 9 - 17 | Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | | Enter ‘DC ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |
| 16 | 94 - 113 | 20 | N | **PURCHASER LICENSE NUMBER**  94 - 95 Type | Zero fill. |
|  |  |  | N N A | 96 - 100 Sequence #   1. Code 2. - 113 Filler | Zero fill. 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 | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **STORAGE PERMIT INDICATOR** | Space fill. |
| 25 | 190 - 208 | 19 | A | **FILLER** | Space fill. |
| 26 | 209-210 | 2 | A | **EXPORT STATE** | Enter valid postal abbreviation for the export state. |
| 27 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 28 | 212 - 226 | 15 | A | **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 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete name. |

**23**



##### Test Oil Co. **8**

D-02345 **1** x

0 7 2 0 0 0 **9**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 0718 2000 | 3579 | AB Carrier | K2468 | Gas & Oil Co. | Peoria | Morton | D-04321 | 20,000 |
| **17** | **18** | **28** | **20** | **15** | **26** | **27** | **16** | **22** |

**Motor Fuel Uniform Schedules**

**Schedule “DD” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | | **Remarks** |
| N  N | | | | 1 - 2  3 - 7 | Type  Sequence # | Enter filer license type.  ‘01’ - for distributor ‘02’ - for supplier ‘08’ - for receiver  (If ‘08’, must be same as Field 16)  Filer license number. (Leading zeroes, if |
| N | | | | 8 | Code | 4 digit license number.) Zero fill. |
|  |  |  | A | 9 - 17 Filler | | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | | Enter ‘DD ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

**Schedule “DD” (ENTRY) Record (continued)**

**Buffer: 256 FIXED LENGTH**

‘01’ - for distributor ‘02’ - for supplier ‘08’ - for receiver

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #** | **Position** | **Length** | **Type** | **Field Description** | **Remarks** |
| 16 | 94 - 113 | 20 | N | **PURCHASER LICENSE NUMBER**  94 - 95 Type | Enter purchaser license type: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | | N  N A | 96 - 100 Sequence #   1. Code 2. - 113 Filler | (If ‘08’, must be same as Field 01) Purchaser 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 | **BILL OF LADING DATE**  132 - 133 Year | Enter a valid date. |
|  |  |  | N | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **FILLER** | Space fill. |
| 25 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 26 | 212 - 226 | 15 | A | **ORIGIN NAME**  212 - 224 City  225 - 226 State | Enter origin name. Space fill after complete name. |
| 27 | 227 - 241 | 15 | A | **DESTINATION NAME**  227 - 239 City  240 - 241 State | Enter destination name. Space fill ater complete name. |
| 28 | 242 - 256 | 15 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete name. |

D-04321 **1**

##### 0 7 2 0 0 0 **9**

**25**

**A** - Agriculture **C** - Construction **F** - Refrigeration **H** - Home heating **I** - Industrial **L** - Lawn **M** - Marine **R** - Railroad **O** - Other (Identify)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Good Food, Inc. | 1215 W. Adams | Springfield, IL | 62701 | A | 2,000 |
| **15** | **28** | **29** | **30** | **24** | **22** |

# Motor Fuel Uniform Schedules

## Schedule “DD-1” (ENTRY) Record

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N  N N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type. ‘01’ - for distributor ‘02’ - for supplier  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Enter ‘DD1‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

## Schedule “DD-1” (ENTRY) Record (continued)

**Buffer: 256 FIXED LENGTH**

**‘A’** - Agriculture **‘C’** - Construction **‘F’** - Refrigeration **‘H’** - Home heating **‘I’** - Industrial

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  16 | **Position**  94 - 113 | **Length**  20 | **Type** | **Field Description**  **PURCHASER LICENSE NUMBER** | **Remarks** |
|  |  |  | N N N A | 94 - 95 Type  96 - 100 Sequence #   1. Code 2. - 113 Filler | 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: |

**‘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 | A | **FILLER** | Space fill. |
| 27 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 28 | 212 - 226 | 15 | A | **PURCHASER STREET ADDRESS** | Enter street address of purchaser. |
| 29 | 227 - 241 | 15 | A | **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 | **PURCHASER ZIP CODE**  242 - 246 Zip code | Enter zip code of purchaser. Enter 5 digit zip code. |
|  |  |  | N | 247 - 250 Zip + 4 code  251 - 256 Filler | Enter 4 digit code if known, else zero fill. Space fill. |

R-14321 **1** x

##### 0 7 2 0 0 0 **9**

0717 2000 A1443 Shipping Co. C19677 1-K Test Oil Co. Detroit, MI Chicago R-12345 11,000

#### 17 18 31 20 25

**15 29 30**

**16 22**

**Motor Fuel Uniform Schedules**

**Schedule “LA” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N N  N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type. ‘08’ - for receiver  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Enter ‘LA ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

## Schedule “LA” (ENTRY) Record (continued)

**Buffer: 256 FIXED LENGTH**

‘1’ - Illinois receipts ‘2’ - Imported

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  16 | **Position**  94 - 113 | **Length**  20 | **Type** | **Field Description**  **SELLER LICENSE NUMBER** | **Remarks** |
|  |  |  | N | 94 - 95 Type | Enter seller license type. |
|  |  |  | N  N A | 96 - 100 Sequence #   1. Code 2. - 113 Filler | ‘08’ - for receiver  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 | **BILL OF LADING DATE**  132 - 133 Year | Enter a valid date. |
|  |  |  | N | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **STORAGE PERMIT INDICATOR** | Space fill. |
| 25 | 190 - 198 | 9 | A | **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. |

‘3’ - Produced

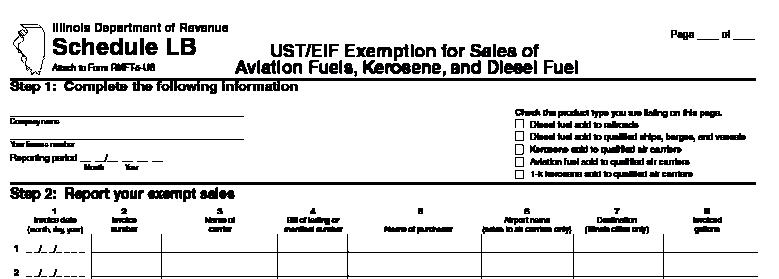
|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 27 | 200 - 210 | 11 | A | **FILLER** | Space fill. |
| 28 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 29 | 212 - 226 | 15 | A | **ORIGIN NAME**  212 - 224 City  225 - 226 State | Enter origin name. Space fill after complete name. |
| 30 | 227 - 241 | 15 | A | **DESTINATION NAME**  227 - 239 City  240 - 241 State | Enter destination name. Space fill after complete name. |
| 31 | 242 - 256 | 15 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete name. |

\* PRODUCT CODE

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AVI - Aviation 1K - Kerosene

**25**



##### Test Oil Co. **8**

x

R-12345 **1**

0 7 2 0 0 0 **9**

0701 2000 CA2435 ABC Trucking BL14589 Deisel Co. Quincy 8,000

**17 18 30 20 15 28 29 22**

**Motor Fuel Uniform Schedules**

**Schedule “LB” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N N  N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type. ‘08’ - for receiver  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Enter ‘LB ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

## Schedule “LB” (ENTRY) Record (continued)

**Buffer: 256 FIXED LENGTH**

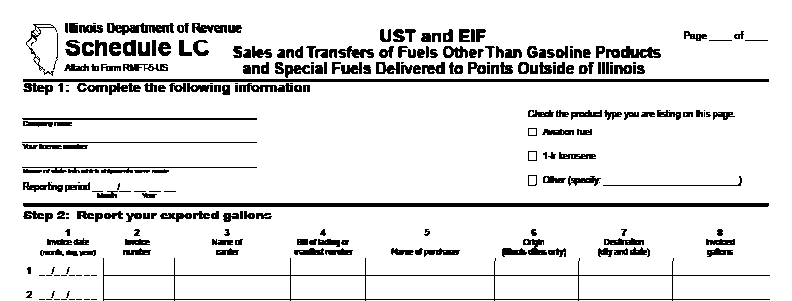
|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  16 | **Position**  94 - 113 | **Length**  20 | **Type** | **Field Description**  **PURCHASER LICENSE NUMBER** | **Remarks** |
|  |  |  | N N N A | 94 - 95 Type  96 - 100 Sequence #   1. Code 2. - 113 Filler | Zero fill. Zero fill. 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 | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **STORAGE PERMIT INDICATOR** | Space fill. |
| 25 | 190 - 198 | 9 | A | **PRODUCT CODE** | Enter 3 character product code. \* |
|  |  |  |  |  | If not contained within code table, enter |
|  |  |  |  |  | product name. |
| 26 | 199 - 210 | 12 | A | **FILLER** | Space fill. |
| 27 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 28 | 212 - 226 | 15 | A | **AIRPORT NAME** | Enter airport name if sold to air carrier. |
|  |  |  |  |  | Space fill after carrier, or barge, space fill. |
| 29 | 227 - 241 | 15 | A | **DESTINATION NAME** | Enter destination name. Space fill after |
|  |  |  |  | 227 - 239 City | complete name. |
|  |  |  |  | 240 - 241 State |  |
| 30 | 242 - 256 | 15 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete |
|  |  |  |  |  | name. |

\* PRODUCT CODE

-----------------------------

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

Test Oil Co. **8 25**



R-12345 **1**

MO **27** x

0 8 2 0 0 0 **9**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0801 2000 89B24 | BDF Trucking | BL4123 | Gas & Oil Co. | Galesburg St. Louis, MO | 4,550 |
| **17 18** | **31** | **20** | **15** | **29 30** | **22** |

**Motor Fuel Uniform Schedules**

**Schedule “LC” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N N  N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type. ‘08’ - for receiver  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Enter ‘LC ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

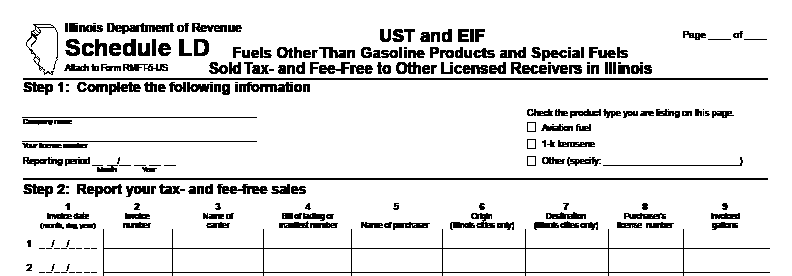
|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 16 | 94 - 113 | 20 | N N N A | **PURCHASER LICENSE NUMBER**  94 - 95 Type  96 - 100 Sequence #   1. Code 2. - 113 Filler | Zero fill. Zero fill. Zero fill. Space fill. |
| 17 | 114 - 119 | 6 | N N | **INVOICE DATE**  114 - 115 Year  116 - 117 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 | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **STORAGE PERMIT INDICATOR** | Space fill. |
| 25 | 190 - 198 | 9 | A | **PRODUCT CODE** | Enter 3 character product code. \* |
|  |  |  |  |  | If not contained within code table, enter |
|  |  |  |  |  | product name. |
| 26 | 199 - 208 | 10 | A | **FILLER** | Space fill. |
| 27 | 209 - 210 | 2 | A | **EXPORT STATE** | Enter valid postal abbreviation for the export |
|  |  |  |  |  | state. |
| 28 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 29 | 212 - 226 | 15 | A | **ORIGIN NAME** | Enter origin name. Space fill after complete |
|  |  |  |  | 212 - 224 City | name. |
|  |  |  |  | 225 - 226 State |  |
| 30 | 227 - 241 | 15 | A | **DESTINATION NAME** | Enter destination name. Space fill after |
|  |  |  |  | 227 - 239 City | complete name. |
|  |  |  |  | 240 - 241 State |  |
| 31 | 242 - 256 | 15 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete |
|  |  |  |  |  | name. |

\* PRODUCT CODE

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1K - Kerosene AVI - Aviation

Test Oil Co. **8 25**



R-12345 **1** x

0 7 2 0 0 0 **9**

0717 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 #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N N  N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type. ‘08’ - for receiver  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Enter ‘LD ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

**Schedule “LD” (ENTRY) Record (continued)**

**Buffer: 256 FIXED LENGTH**

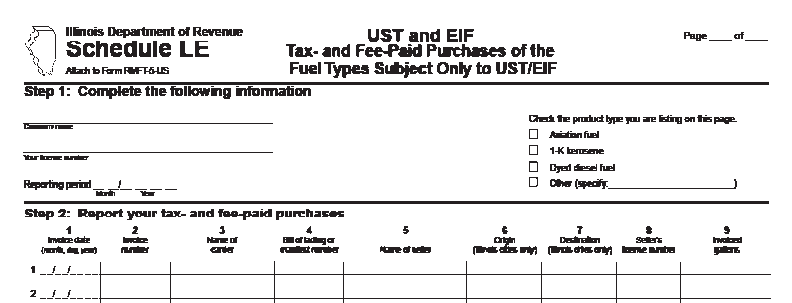
|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  16 | **Position**  94 - 113 | **Length**  20 | **Type** | **Field Description**  **PURCHASER LICENSE NUMBER** | **Remarks** |
|  |  |  | N | 94 - 95 Type | Enter purchaser license type. |
|  |  |  | N  N A | 96 - 100 Sequence #   1. Code 2. - 113 Filler | ‘08’ - for receiver  Purchaser 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 | **BILL OF LADING DATE**  132 - 133 Year | Enter a valid date. |
|  |  |  | N | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **STORAGE PERMIT INDICATOR** | Space fill. |
| 25 | 190 - 198 | 9 | A | **PRODUCT CODE** | Enter 3 character product code. \* |
|  |  |  |  |  | If not contained within code table, enter |
|  |  |  |  |  | product name. |
| 26 | 199 - 210 | 12 | A | **FILLER** | Space fill. |
| 27 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 28 | 212 - 226 | 15 | A | **ORIGIN NAME** | Enter origin name. Space fill after complete |
|  |  |  |  | 212 - 224 City | name. |
|  |  |  |  | 225 - 226 State |  |
| 29 | 227 - 241 | 15 | A | **DESTINATION NAME** | Enter destination name. Space fill after |
|  |  |  |  | 227 - 239 City | complete name. |
|  |  |  |  | 240 - 241 State |  |
| 30 | 242 - 256 | 15 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete |
|  |  |  |  |  | name. |

\* PRODUCT CODE

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AVI - Aviation 1K - Kerosene

**25**



##### Test Oil Co. **8**

x

R-12345 **1**

##### 0 72 0 0 0 **9**

0723 2000 A4413 ABC Trucking BL145 Aviation Fuel Co. Carbondale Springfield R-15432 100,000

#### 17 18 30 20 15 28 29 16 22

**Motor Fuel Uniform Schedules**

**Schedule “LE” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N N  N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type. ‘08’ - for receiver  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Enter ‘LE ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

**Schedule “LE” (ENTRY) Record (continued)**

**Buffer: 256 FIXED LENGTH**

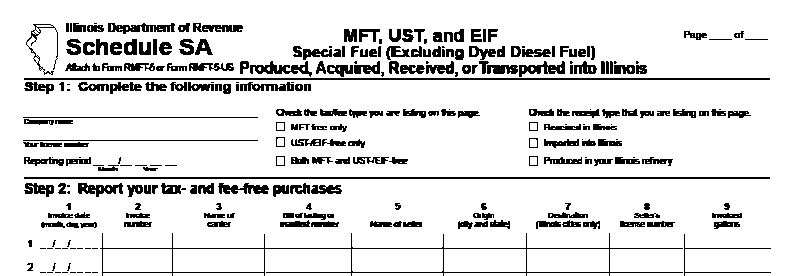
|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  16 | **Position**  94 - 113 | **Length**  20 | **Type** | **Field Description**  **SELLER LICENSE NUMBER** | **Remarks** |
|  |  |  | N | 94 - 95 Type | Enter seller license type: |
|  |  |  | N  N A | 96 - 100 Sequence #   1. Code 2. - 113 Filler | ‘08’ - for receiver  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 | **BILL OF LADING DATE**  132 - 133 Year | Enter a valid date. |
|  |  |  | N | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **FILLER** | Space fill. |
| 25 | 190 - 198 | 9 | A | **PRODUCT CODE** | Enter 3 character product code. \* |
|  |  |  |  |  | If not contained within code table, enter |
|  |  |  |  |  | product name. |
| 26 | 199 - 210 | 12 | A | **FILLER** | Space fill. |
| 27 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 28 | 212 - 226 | 15 | A | **ORIGIN NAME** | Enter origin name. Space fill after complete |
|  |  |  |  | 212 - 224 City | name. |
|  |  |  |  | 225 - 226 State |  |
| 29 | 227 - 241 | 15 | A | **DESTINATION NAME** | Enter destination name. Space fill after |
|  |  |  |  | 227 - 239 City | complete name. |
|  |  |  |  | 240 - 241 State |  |
| 30 | 242 - 256 | 15 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete |
|  |  |  |  |  | name. |

\* PRODUCT CODE

-----------------------------

1K - Kerosene AVI - Aviation DYE - Dyed Diesel

**25**



|  |  |  |
| --- | --- | --- |
| il Co.  1 | **8** | **23** |
| **1** |  |
| 0 7 2 0 0 0 | **9** | x |

##### Gas & O

D-0432 x

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0718 2000 | 3579 | Transport Co. | K2468 | Test Oil Co. Madison, WI Rockford D-02345 | 20,000 |
| **17** | **18** | **30** | **20** | **15 28 29 16** | **22** |

**Motor Fuel Uniform Schedules**

**Schedule “SA” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | | **Remarks** |
| N  N | | | | 1 - 2  3 - 7 | Type  Sequence # | Enter filer license type.  ‘01’ - for distributor ‘02’ - for supplier ‘08’ - for receiver  (if ‘08’, must be same as Field 16)  Filer license number. (Leading zeroes, if |
| N | | | | 8 | Code | 4 digit license number.) Zero fill. |
|  |  |  | A | 9 - 17 Filler | | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | | Enter ‘SA ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

**Schedule “SA” (ENTRY) Record (continued)**

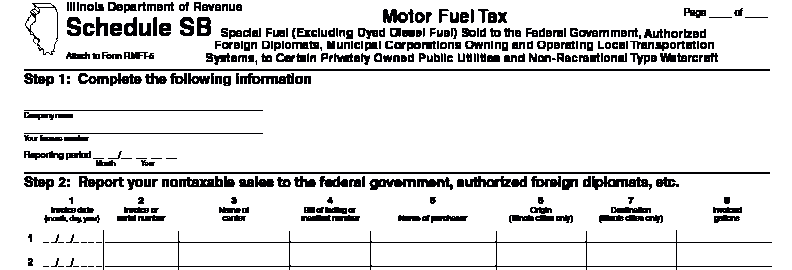
**Buffer: 256 FIXED LENGTH**

‘1’ - Illinois receipts ‘2’ - Imported

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  16 | **Position**  94 - 113 | **Length**  20 | **Type** | **Field Description**  **SELLER LICENSE NUMBER** | **Remarks** |
|  |  |  | N | 94 - 95 Type | Enter seller license type: ‘01’ - for distributor |
|  |  |  | N N | 96 - 100 Sequence #  101 Code | ‘02’ - for supplier ‘08’ - for receiver  (If ‘08’, must be same as Field 01)  Seller license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 102 - 113 Filler | 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 | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **FILLER** | Space fill. |
| 25 | 199 - 199 | 1 | A/N | **RECEIPT TYPE** | Enter schedule gallon type. |

‘3’ - Produced

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 26 | 200 - 210 | 11 | A | **FILLER** | Space fill. |
| 27 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 28 | 212 - 226 | 15 | A | **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 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete name. |



**Motor Fuel Uniform Schedules**

Gas & Oil Co. **8**

D-04321

**1**

0 7 2 0 0 0 **9**

0717 2000 12356 Carrier Co. B9750 ABX Mass Transit Morris Monmouth 15,000

**28**

**17 18 29 20 15 27 22**

**Schedule “SB” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N  N N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type. ‘01’ - for distributor ‘02’ - for supplier  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Enter ‘SB ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

**Schedule “SB” (ENTRY) Record (continued)**

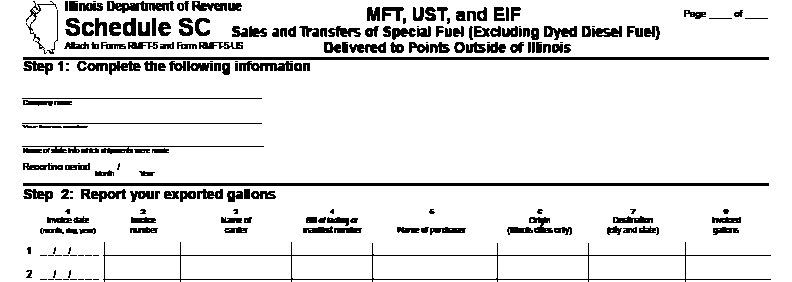
**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  16 | **Position**  94 - 113 | **Length**  20 | **Type** | **Field Description**  **PURCHASER LICENSE NUMBER** | **Remarks** |
|  |  |  | N N N A | 94 - 95 Type  96 - 100 Sequence #   1. Code 2. - 113 Filler | Zero fill. Zero fill. 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 | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **STORAGE PERMIT INDICATOR** | Space fill. |
| 25 | 190 - 210 | 21 | A | **FILLER** | Space fill. |
| 26 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 27 | 212 - 226 | 15 | A | **ORIGIN NAME** | Enter origin name. Space fill after complete |
|  |  |  |  | 212 - 224 City | name. |
|  |  |  |  | 225 - 226 State |  |
| 28 | 227 - 241 | 15 | A | **DESTINATION NAME** | Enter destination name. Space fill after |
|  |  |  |  | 227 - 239 City | complete name. |
|  |  |  |  | 240 - 241 State |  |
| 29 | 242 - 256 | 15 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete |
|  |  |  |  |  | name. |

**8**

Gas & Oil Co.

D-04321 **1**



**Motor Fuel Uniform Schedules**

MO **26**

0 7 2 0 0 0 **9**

0716 2000 9531 Transport, Inc. B6930 Test Oil Co. Springfield St. Louis, MO 9,000

**17 18 30 20 15 28 29 22**

**Schedule “SC” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | | **Remarks** |
| N  N | | | | 1 - 2  3 - 7 | Type  Sequence # | Enter filer license type.  ‘01’ - for distributor ‘02’ - for supplier ‘08’ - for receiver  Filer license number. (Leading zeroes, if |
| N | | | | 8 | Code | 4 digit license number.) Zero fill. |
|  |  |  | A | 9 - 17 Filler | | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | | Enter ‘SC ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 16 | 94 - 113 | 20 | N N N A | **PURCHASER LICENSE NUMBER**  94 - 95 Type  96 - 100 Sequence #   1. Code 2. - 113 Filler | Zero fill. Zero fill. 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 | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **STORAGE PERMIT INDICATOR** | Space fill. |
| 25 | 190 - 208 | 19 | A | **FILLER** | Space fill. |
| 26 | 209 - 210 | 2 | A | **EXPORT STATE** | Enter valid postal abbreviation for the export |
|  |  |  |  |  | state. |
| 27 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 28 | 212 - 226 | 15 | A | **ORIGIN NAME** | Enter origin name. Space fill after complete |
|  |  |  |  | 212 - 224 City | name. |
|  |  |  |  | 225 - 226 State |  |
| 29 | 227 - 241 | 15 | A | **DESTINATION NAME** | Enter destination name. Space fill after |
|  |  |  |  | 227 - 239 City | complete name. |
|  |  |  |  | 240 - 241 State |  |
| 30 | 242 - 256 | 15 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete |
|  |  |  |  |  | name. |

**23**

##### Test Oil Co. **8**

D-02345 **1** x

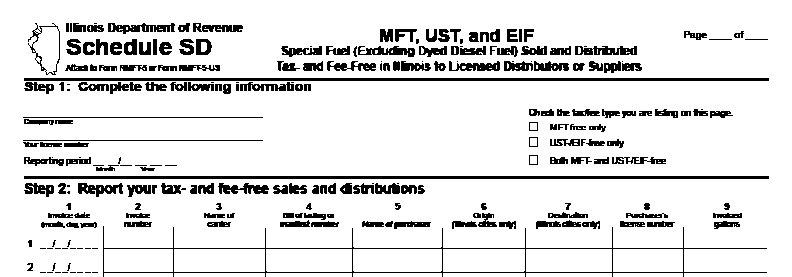
0 7 2 0 0 0 **9**

0718 2000 3579 AB Carrier K2468 Gas & Oil Co. Peoria Morton D-04321 20,000

#### 17 18 28 20 15 26

**27 16 22**

**Motor Fuel Uniform Schedules**



**Schedule “SD” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | | **Remarks** |
| N  N | | | | 1 - 2  3 - 7 | Type  Sequence # | Enter filer license type.  ‘01’ - for distributor ‘02’ - for supplier ‘08’ - for receiver  (If ‘08’, must be same as Field 16)  Filer license number. (Leading zeroes, if |
| N | | | | 8 | Code | 4 digit license number.) Zero fill. |
|  |  |  | A | 9 - 17 Filler | | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | | Enter ‘SD ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

**Schedule “SD” (ENTRY) Record (continued)**

**Buffer: 256 FIXED LENGTH**

‘01’ - for distributor ‘02’ - for supplier ‘08’ - for receiver

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #** | **Position** | **Length** | **Type** | **Field Description** | **Remarks** |
| 16 | 94 - 113 | 20 | N | **PURCHASER LICENSE NUMBER**  94 - 95 Type | Enter purchaser license type: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | | N  N A | 96 - 100 Sequence #   1. Code 2. - 113 Filler | (If ‘08’, must be same as Field 01) Purchaser 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 | **BILL OF LADING DATE**  132 - 133 Year | Enter a valid date. |
|  |  |  | N | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **FILLER** | Space fill. |
| 25 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 26 | 212 - 226 | 15 | A | **ORIGIN NAME** | Enter origin name. Space fill after complete |
|  |  |  |  | 212 - 224 City | name. |
|  |  |  |  | 225 - 226 State |  |
| 27 | 227 - 241 | 15 | A | **DESTINATION NAME** | Enter destination name. Space fill after |
|  |  |  |  | 227 - 239 City | complete name. |
|  |  |  |  | 240 - 241 State |  |
| 28 | 242 - 256 | 15 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete |
|  |  |  |  |  | name. |

##### Gas & Oil Co. **8**

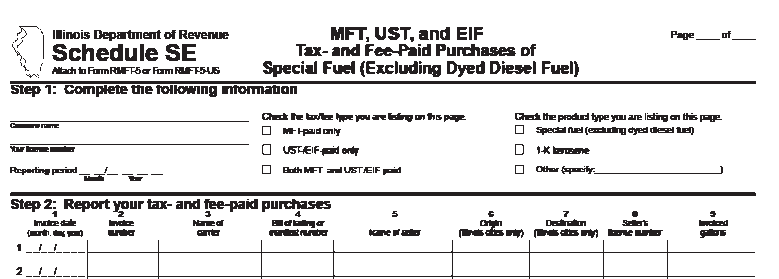
D-04321 **1**

##### 0 7 2 0 0 0 **9**

**23 25**

x

x



|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 0710 2000 | 5134 | Fuel Carrier Co. K5134 | XYZ Oil Co. | Rock Island Metropolis S-02316 | 8,500 |
| **17** | **18** | **30 20** | **15** | **28 29 16** | **22** |

**Motor Fuel Uniform Schedules**

**Schedule “SE” (ENTRY) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | | **Remarks** |
| N  N | | | | 1 - 2  3 - 7 | Type  Sequence # | Enter filer license type.  ‘01’ - for distributor ‘02’ - for supplier ‘08’ - for receiver  (If ‘08’, must be same as Field 16)  Filer license number. (Leading zeroes, if |
| N | | | | 8 | Code | 4 digit license number.) Zero fill. |
|  |  |  | A | 9 - 17 Filler | | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | | Enter ‘SE ‘. |
| 3 | 21 - 22 | 2 | A | **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 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 60 | 4 | A | **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. |

**Schedule “SE” (ENTRY) Record (continued)**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  16 | **Position**  94 - 113 | **Length**  20 | **Type** | **Field Description**  **SELLER LICENSE NUMBER** | **Remarks** |
|  |  |  | N | 94 - 95 Type | Enter seller license type: ‘01’ - for distributor |
|  |  |  | N N | 96 - 100 Sequence #  101 Code | ‘02’ - for supplier ‘08’ - for receiver  (If ‘08’, must be same as Field 01) Seller license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 102 - 113 Filler | 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 | 134 - 135 Month | 01 - 12. |
|  |  |  | N | 136 - 137 Day | 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 | A | **STORAGE PERMIT INDICATOR** | Space fill. |
| 25 | 190 - 198 | 9 | A | **PRODUCT CODE** | Enter 3 character product code. \* |
|  |  |  |  |  | If not contained within code table, enter |
|  |  |  |  |  | product name. |
| 26 | 199 - 210 | 12 | A | **FILLER** | Space fill. |
| 27 | 211 - 211 | 1 | A | **MEDIA CODE** | Enter ‘D’ for diskette. |
| 28 | 212 - 226 | 15 | A | **ORIGIN NAME** | Enter origin name. Space fill after complete |
|  |  |  |  | 212 - 224 City | name. |
|  |  |  |  | 225 - 226 State |  |
| 29 | 227 - 241 | 15 | A | **DESTINATION NAME** | Enter destination name. Space fill after |
|  |  |  |  | 227 - 239 City | complete name. |
|  |  |  |  | 240 - 241 State |  |
| 30 | 242 - 256 | 15 | A | **CARRIER NAME** | Enter carrier name. Space fill after complete |
|  |  |  |  |  | name. |

\* PRODUCT CODE

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SPF - Special fuel (excluding dyed diesel) 1K - Kerosene

**Total “S” (SCHEDULE TOTAL) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N  N N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type.  ‘01’ - for distributor ‘02’ - for supplier ‘08’ - for receiver  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Enter schedule type being totalled. |
| 3 | 21 - 22 | 2 | A | **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 | A | **RECORD TYPE** | Entry type. Enter an ‘S’ for schedule type total record. |
| 6 | 26 - 26 | 1 | A | **FILING INDICATOR** | Transaction type indicator.  **‘O’** - Original 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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **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 | **SCHEDULE NET GALLONS** | Total invoiced gallons from the specified schedule type. Format 9 (14) V9. See instructions on Page 7. |
| 15 | 117 - 126 | 10 | A | **FILLER** | Space fill. |
| 16 | 127 - 136 | 10 | N | **TOTAL ORIGINAL ENTRIES** | Total of all original entry records for this schedule type. |
| 17 | 137 - 146 | 10 | N | **TOTAL CORRECTION ENTRIES** | Total of all correction entry records for this schedule type. |
| 18 | 147 - 156 | 10 | N | **TOTAL REVERSAL ENTRIES** | Total of all reversal entry records for this schedule type. |
| 19 | 157 - 166 | 10 | N | **TOTAL NEGATIVE ENTRIES** | Total of all negative entry records for this schedule type. |
| 20 | 167 - 256 | 90 | A | **FILLER** | Space fill. |

**Total “V” (LICENSE TOTAL) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N  N N | 1 - 2 Type  3 - 7 Sequence #  8 Code | Enter filer license type.  ‘01’ - for distributor ‘02’ - for supplier ‘08’ - for receiver  Filer license number. (Leading zeroes, if 4 digit license number.)  Zero fill. |
|  |  |  | A | 9 - 17 Filler | Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Space fill. |
| 3 | 21 - 22 | 2 | A | **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 | A | **RECORD TYPE** | Entry type. Enter a ‘V’ for license total record. |
| 6 | 26 - 26 | 1 | A | **FILING INDICATOR** | Transaction type indicator.  **‘O’** - Original 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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **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 | A | **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 | A | **FILLER** | Space fill. |

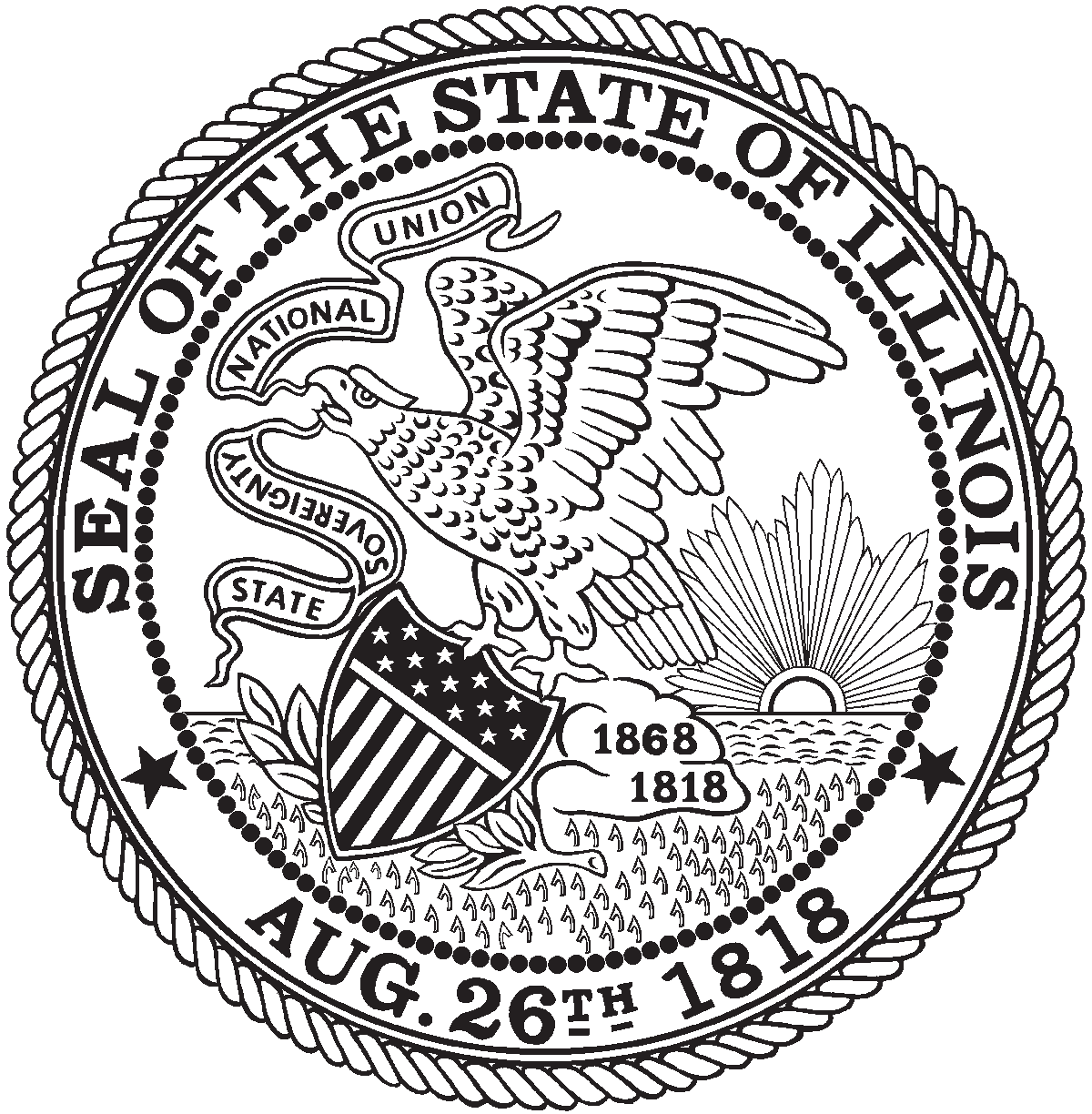
**Total “Z” (FILE TOTAL) Record**

**Buffer: 256 FIXED LENGTH**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field #**  1 | **Position**  1 - 17 | **Length**  17 | **Type** | **Field Description**  **FILER LICENSE** | **Remarks** |
|  |  |  | N  A | 1 - 8 Filer License  9 - 17 Filler | Zero fill.  Space fill. |
| 2 | 18 - 20 | 3 | A | **IDOR SCHEDULE TYPE** | Space fill. |
| 3 | 21 - 22 | 2 | A | **FILER PERMIT KIND** | Space fill. |
| 4 | 23 - 24 | 2 | N | **FILER LICENSE YEAR** | Zero fill. |
| 5 | 25 - 25 | 1 | A | **RECORD TYPE** | Entry type. Enter a ‘Z’ for file total record. |
| 6 | 26 - 26 | 1 | A | **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 N | **LIABILITY DATE**  48 - 49 Year  50 - 51 Month | Enter valid date.  Enter last 2 digits only.  Example: Enter Year 2000 as ‘00’.  01 - 12. |
| 10 | 52 - 56 | 5 | A | **FILLER** | Space fill. |
| 11 | 57 - 71 | 15 | N | **FILLER** | 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 | **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 | A | **FILLER** | Space fill. |
| 16 | 127 - 136 | 10 | N | **TOTAL ORIGINAL ENTRIES** | Total of all original entry records for this file. |
| 17 | 137 - 146 | 10 | N | **TOTAL CORRECTION ENTRIES** | Total of all correction entry records for this file. |
| 18 | 147 - 156 | 10 | N | **TOTAL REVERSAL ENTRIES** | Total of all reversal entry records for this file. |
| 19 | 157 - 166 | 10 | N | **TOTAL NEGATIVE ENTRIES** | Total of all negative entry records for this file. |
| 20 | 167 - 256 | 90 | A | **FILLER** | Space fill. |

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R-2/09



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