

WALKER COUNTY

P.O. Box 1447

Jasper, Alabama 35502

PHONE 384-7232

This Space for Office use Only.

Effective Aug 15, 1977

ACT 98

APPROVED 7-25-77

MONTHLY TAX RETURN  
MOTOR FUELS (Other Than Gasoline)

Name .....

City or Town ....., State .....

Month of ....., 20 .....

Mail to Walker County P.O. Box 1447, Jasper, AL 35502, on or BEFORE the 20th day of the next succeeding month.

TO BE ACCOUNTED FOR	No. 2 DIESEL FUEL GALLONS	No. 1 Diesel KEROSENE OTHER FUELS GALLONS
1. Opening Inventory		
2. Tax Free Receipts (Schedule 1)		
3.		
4. Gains		
<b>TOTAL</b>		

ACCOUNTED FOR		
5. Taxable Sales		
6. Taxable Use		
7. Tax Free Sales to License Holders (Schedule 11)		
8. Sales to State of Alabama		
9. Sales to County of Walker		
10.		
11. Sales in other Counties or States		
12. Losses		
Closing Inventory		
<b>TOTAL</b>		

**INSTRUCTIONS**

1. This return must be filed with the Walker County Commission not later than the 20th day of and next succeeding month in which sales and withdrawals are made.

2. This return is required on all diesel fuel sold or withdrawn from storage in the County of Walker except that it is not required from filling stations when such stations purchase fuel from distributors in this county or from distributors outside the county when such distributors report and pay tax on sales in Walker County.

3. All deductions made by reason of sales to the U.S. Government must be supported by evidence to the County Commission that such fuel was sold from dealer's own stock for exclusive use by the U.S. Government in essential governmental activities. When evidence not submitted along with reports, it must be held subject to inspection by agents of the Walker County Commission.

Taxable Gallons ..... @ 2 cents sold or used during the month ----- \$ .....

Less 3% Collection discount ----- \$ .....

Check enclosed in payment total tax ----- \$ .....

AFFIDAVIT

STATE OF ALABAMA }  
..... COUNTY } I, ..... (Name of person making affidavit)

the ..... of the ..... (This line to be filled in when return is made by corporation) whose

Address is ..... first being duly sworn, deposes and says upon oath that the statement here submitted is full, true and correct to the best of my knowledge and belief, and that the inventories shown hereon are book  or actual

Subscribed and sworn to before me this the ..... day of ....., 20 .....

Notary Public

**SCHEDULE I  
TAX RECEIPTS OF MOTOR FUELS**

DATE	RECEIVED FROM	INVOICE NUMBER	DIESEL FUEL	TRACTOR FUEL	KEROSENE	OTHER	OTHER
If Necessary, Attach Supplementary Schedule							
TOTALS TO LINE 2 OF TAX RETURN							

**SCHEDULE II  
TAX FREE SALES TO LICENSE HOLDERS**

DATE	LICENSE HOLDER ONLY	DIESEL FUEL	TRACTOR FUEL	KEROSENE	OTHER	OTHER
If Necessary, Attach Supplementary Schedule						
TOTALS TO LINE 7 OF TAX RETURN						

**SALE OF DIESEL FUEL IN WALKER COUNTY**

BONDED DEALER'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

MONTH OF \_\_\_\_\_, 20 \_\_\_\_\_

NAME OF EACH CUSTOMER	ADDRESS	TOTAL GALLONS SOLD	
		No. 2 Diesel Fuel	No. 1 Diesel Kerosene Other Fuels