

# CITY OF ANNISTON, ALABAMA

P.O. BOX 2168  
ANNISTON, AL 36202

## MONTHLY WHOLESALE MOTOR FUEL REPORT

FOR THE MONTH OF \_\_\_\_\_

(All returns must be postmarked by 20<sup>th</sup> of month)

ATTN: TAX DEPT

**Acct#**

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Additional forms needed

CONTACT PERSON: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Number of gallons of motor fuel  
sold in the City of Anniston \_\_\_\_\_ X \$.02 .....\$ \_\_\_\_\_

Number of gallons of motor fuel sold  
in the Police Jurisdiction \_\_\_\_\_ X \$.01 .....\$ \_\_\_\_\_

Amount of tax due (sum of City and Jurisdiction) .....\$ \_\_\_\_\_

LATE PAYMENT PENALTY, if applicable ..... \$ \_\_\_\_\_  
15% if less than 30 days past due  
30% if more than 30 days past due  
Plus 1% per month interest

**TOTAL AMOUNT ENCLOSED** (tax amount & penalty, if any) \$ \_\_\_\_\_

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UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE EXAMINED THIS FORM AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE ABOVE REPORT IS TRUE AND ACCURATELY SHOWS THE TOTAL AMOUNT OF GASOLINE SALES BY SUCH LICENSEE DURING THE PRECEDING MONTH.

\_\_\_\_\_  
SIGNATURE OF LICENSEE OR DESIGNATED AGENT

\_\_\_\_\_  
DATE

*Make checks payable to:* City of Anniston

Remit monthly report and payment to:  
City of Anniston  
Attn: Finance Department  
P.O. Box 2168  
Anniston AL 36202-2168

Phone: (256) 231-7716  
Fax: (256) 231-7664  
Web: [www.anniston.al.gov](http://www.anniston.al.gov)