LFCL

Postmark Date

NAME OF CARRIER

# KANSAS DEPARTMENT OF REVENUE LIQUID FUEL CARRIER PETROLEUM PRODUCTS REPORT SCHEDULE OF DELIVERIES

Office Use Only

FEIN NO.:\_\_\_\_\_ MONTH AND YEAR:\_\_\_\_\_

SCHEDULE NO .:

ADDRESS

LICENSE NO.:\_\_\_\_\_

(See instructions)

#### CITY STATE ZIP

PERSON HIRING THE CARRIER SELLER					DELIVERED TO			DATE	MANIFEST	GALLONS		PRODUCT	
COMPANY NAME	FEIN	COMPANY NAME	FEIN	MODE	ORIGIN	NAME	ADDRESS	FEIN	DELIVERED	NUMBER	GROSS	NET	CODE
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)
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This report must be filed with the Department of Revenue on or before the 15th day of the following month for which the report is made.

I certify this to be a true, complete, and accurate report of all fuels transported as a duly licensed carrier.

# LIQUID FUEL CARRIER PETROLEUM PRODUCTS REPORT - SCHEDULE OF DELIVERIES - INSTRUCTIONS

# **GENERAL INSTRUCTIONS**

Schedule provides detail information of each delivery included on the Common and Contract Petroleum Products Carrier Report. Prior to recording the information requested in columns (1) through (10), you should organize your records as follows:

Schedule 14A - Total all deliveries of fuel from in-state locations to locations outside the state (exports) Schedule 14B - Total all deliveries of fuel from out-of-state locations to locations inside the state (imports) Schedule 14C - Total all deliveries of fuel between points in the state (intrastate)

# **COLUMN INSTRUCTIONS**

Column (1) & (2)

Person Hiring the Carrier - Enter the name and federal employer identification number of the company that hired you.

### Column (3) & (4)

Seller - Enter the name and federal employer identification number of the company from whose account the fuel was withdrawn at the terminal.

# Column (5)

Mode; Mode of Transport - Enter one of the following:

J = Truck PL = Pipeline R = Rail B = Barge S = Ship (Great Lakes or ocean marine vessel)

### Column (6)

Origin - Enter the city and/or state or country shown on the delivery document (bill of lading, manifest or other loading document issued by the terminal operator) where the petroleum product was loaded for each delivery. If the product was loaded at a terminal, enter the uniform terminal code assigned to such terminal.

### Column (7), (8), & (9)

Delivered to - Enter the name, address and federal employer identification number of the final delivery point. If delivered to a terminal, enter the terminal code for that terminal.

# Column (10)

Date delivered - Enter the date the petroleum product was delivered for each delivery. (MM DD YY)

#### Column (11)

Manifest number - Enter the identifying number from the bill of lading issued at the terminal when product is removed over the rack. In the case of pipeline or barge movements, enter the pipeline or barge ticket number.

# Column (12), (13), & (14)

Gallons - Enter the number of gross and net gallons and product code for each delivery. For additional Product codes go to: https://www.ksrevenue.org/pdf/UniformProductCodes.pdf

PRODUCT CODE:	125 - AVIATION GASOLINE	167 - LOW SULFUR DIESEL # 2-UNDYED	231 - NO. 1 DIESEL FUEL - DYED
54 - PROPANE	130 - JET FUEL	224 - COMPRESSED NATURAL GAS	E00-E99 - ETHANOL
65 - GASOLINE	142 - KEROSENE	225 - LIQUEFIED NATURAL GAS	M00-M99 - METHANOL
122 - BLENDING COMPONENTS	150 - NO. 1 FUEL OIL	226 - HIGH SULFUR DIESEL-DYED	- OTHER (see FTA PRODUCT CODE LIST)
124 - GASOHOL	161 - LOW SULFUR DIESEL #1-UNDYED	227 - LOW SULFUR DIESEL- DYED	

To see how the filing requirements apply to you, go to www.ksrevenue.org Policy Information Library and look up K.S.A.79-3416

Mail the completed Liquid Fuel Carrier Petroleum Products Report form to: Kansas Department of Revenue, Customer Relations-Motor Fuel, PO Box 750680,<br/>Topeka, Kansas 66625-0680Phone: 785-368-8222Fax: 785-296-2703