Bulk Storage Capacity: (If applicable)  (Gallons)  Location Fuel Was Consumed:  Indicate Type of PTO Truck  Cement Mix  Garbage		Receipt Summary Schedule Record of West Virginia Tax Paid Motor Fuel Purchases  Period Ending of Claim  (Earliest Invoice Date) From: To:  Gasoline Only		<ul> <li>IMPORTANT</li> <li>Submit with WV Refund Application (WV/MFR-14)</li> <li>Report in Whole Gallons</li> <li>If inventory is maintained: Use Inventory Worksheet (Schedule D) to calculate gallons for refund.</li> <li>All receipts must be from a West Virginia location.</li> <li>A separate application must be submitted for each refund category; however, you may apply for more than one product type on a single refund application.</li> <li>Dispose of motor fuel refund applications which are prior to effective date of September 2009.</li> </ul>			
0.11 11 4 4 4 4 EFF	<b>.</b> .		(Off Highw Period Ending		Purchases Dat	ed	Due Date
8-digit Acct # or FEIN:			March 31	(circen)	January 1 – Marc	h 31	April 30
Name:			June 30		April 1 – June 30		July 31
			September 30		July 1 – Septemb		October 31
			December 31		October – Decemb	oer 31	January 31
Contact Name:			A conjugation of		12 mantha from dat	o of mund	anno ou dolivour
Contact Telephone No:			Agriculture: Casualty Loss:		12 months from date of purchase or delivery  Three years from end of month of loss		
Contact Telephone Ivo.			Poultry House:		Three years Three years		
					Fiscal Yr Ending: June 30 (July 1 – June 30)		uly 1 – June 30)
			Government:		(Last acceptable po		
(The right to reco		Do not submit receipt receipts for at least three is not assignable. No paym	years. All refur ent may be mad	nds are subje e to any pers	ect to audit or review son other than the o	riginal p	QUANTITY
MM / DD / YY		PURCHASED FROM	Λ	Receipt/	Invoice Number	(List I	ndividual Gallons)
					SUBTOTAL		
			Total of back	page and an	y additional pages		
			TOTAL	REFUND <i>A</i>	BLE GALLONS		
(Transfer to the back of refund application – Calculation of Refund)							

## RECORD OF GASOLINE PURCHASES ONLY

Date of Purchase	DAIDCHA GED EDOM	D ' 1/I ' N 1	QUANTITY (List individual gallons)				
MM / DD / YY	PURCHASED FROM	Receipt/Invoice Number					
Subtotal of page (Use additional pages if necessary)							