## YOU MUST COMPLETE SEPARATE SCHEDULES FOR EACH PRODUCT TYPE AND HIRING COMPANY

## All returns filed with a supporting schedule containing more than 10 lines of data must be filed electronically at <u>https://mytaxes.wvtax.gov</u>.

| FEIN                                |   | NAME             | JAME   |             |                        |             | SCHEDULE 3<br>LOADED IN WEST VIRGINIA AND DELIVERED IN WEST VIRGINIA          |  |                              |                                    | MONTH/YEAR    |             |  |
|-------------------------------------|---|------------------|--|-------------|------------------------|-------------|---|--|------------------------------|------------------------------------|---------------|-------------|--|
| PRODUCT INFORMATION (CHECK APPLICAB |   |                  |  |             |                        |             | BLE BOX) MODE OF TRANSF   |  |                              |                                    | PORTATIO      | NCODES      |  |
| □ 130 – Avi                         | iation Gasolir<br>iation Jet Fue<br>ending Comp<br>isohol |                  | <ul> <li>228 – Diesel – Dyed</li> <li>160 – Diesel – Undyed</li> <li>170 – Biodiesel – Undyed</li> <li>072 – Kerosene – Dyed</li> <li>142 – Kerosene – Undyed</li> </ul> |             |                        |             | 054 – Propane<br>224 – Compres<br>225 – Liquefied<br>Other – Produc<br>Produc | Natural Gas                                      | Gas <b>R</b> -<br><b>B</b> - | J — Truck<br>R — Rail<br>B — Barge |               |             |  |
| HIRING COMPANY                      |   |                  | SELLER   |             |                        |             | DELIVERED TO  |  |                              |                                    | GALLONS       |             |  |
| (1)<br>Name                         | (2)<br>FEIN   | (3)<br>Name      | (4)<br>FEIN  | (5)<br>Mode | (6)<br>Point of Origin | (7)<br>Name | (8)<br>Address  | (9)<br>FEIN                                      | (10)<br>Date<br>Delivered    | (11)<br>Bill of Lading<br>Number   | (12)<br>Gross | (13)<br>Net |  |
|                                     |   | <br> <br> <br>   |  |             |                        |             |   |  |                              |                                    |               |             |  |
|                                     |   | <br>             |  |             |                        |             |   |  |                              |                                    |               |             |  |
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|                                     |   | 1<br> <br> <br>  |  |             |                        |             |   |  |                              |                                    |               |             |  |
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|                                     |   |                  |  |             |                        |             |   |  |                              |                                    |               |             |  |
|                                     |   |                  |  |             |                        |             | Total Gross Gallons – Transfer to Line 3 on Report                            |  |                              |                                    |               |             |  |
|                                     |   |                  |  |             |                        |             | Total   | Total Net Gallons – Transfer to Line 3 on Report |                              |                                    |               |             |  |

## **IMPORTANT NOTICE:**

Tax Account Administration PO Box 1682 Charleston, WV 25326-1682

## You must obtain prior approval to submit your own schedules.