

MFT-504I

Rev. 7-15

S

SUPPLIER/PERMISSIVE SUPPLIER SCHEDULE OF DISBURSEMENTS

West Virginia
State Tax
Department

YOU MUST COMPLETE SEPARATE SCHEDULES FOR EACH PRODUCT TYPE AND PURCHASER

All returns filed with a supporting schedule containing more than 25 lines of data must be filed electronically at <https://mytaxes.wvtax.gov>.

| | | | | |
|--|---|---|-------------------------------------|------------|
| FEIN or 8-Digit Acct No. | NAME | SCHEDULE 7B Exported sales – <u>West Virginia</u> tax collected | | MONTH/YEAR |
| PRODUCT INFORMATION (CHECK APPLICABLE BOX) | | | MODE OF TRANSPORTATION CODES | |
| <input type="checkbox"/> 150 – #1 Fuel Oil | <input type="checkbox"/> 228 – Diesel – Dyed | <input type="checkbox"/> 054 – Propane | J — Truck | |
| <input type="checkbox"/> 125 – Aviation Gasoline | <input type="checkbox"/> 160 – Diesel – Undyed | <input type="checkbox"/> 224 – Compressed Natural Gas | R — Rail | |
| <input type="checkbox"/> 130 – Aviation Jet Fuel | <input type="checkbox"/> 170 – Biodiesel – Undyed | <input type="checkbox"/> 225 – Liquefied Natural Gas | B — Barge | |
| <input type="checkbox"/> 122 – Blending Components | <input type="checkbox"/> 072 – Kerosene – Dyed | <input type="checkbox"/> Other – Product Type _____ | ST — Stationary Transfer | |
| <input type="checkbox"/> 124 – Gasohol | <input type="checkbox"/> 142 – Kerosene – Undyed | Product Code _____ | BA — Book Adjustment | |
| <input type="checkbox"/> 065 – Gasoline | | | | |

| PRODUCT DISBURSEMENT INFORMATION | | | | | | | | | | | |
|--|--|-------------|-----------------|-------------|----------------------------|----------------------------|-----------------------|---------------------------------|----------------------|---------------------|-----------------------------|
| (1) Carrier/ Transporter's Name | (2) Carrier/ Transporter's FEIN | (3) Mode | (4) Point of | | (5) Purchaser's Name | (6) Purchaser's FEIN | (7) Date Loaded | (8) Bill of Lading Number | (9) Gross Gallons | (10) Net Gallons | (11) Invoiced Gallons |
| | | | Origin | Destination | | | | | | | |
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| TOTAL THIS PAGE | | | | | | | | | | | |
| TOTAL ALL PAGES INVOICED GALLONS ONLY BY PRODUCT TYPE – TRANSFER TO LINE 3 OF WORKSHEET A | | | | | | | | | | | |

Tax Account Administration Division
PO Box 2991
Charleston, WV 25330-2991

IMPORTANT NOTICE:
You must obtain prior approval to submit your own schedules.