

**Summary  
Exempt Sales by Credit Card Issuers  
To Governmental Entities**

Name of Fuel Vendor \_\_\_\_\_

Federal Employer Number \_\_\_\_\_

Please enter the information below for each governmental entity to whom the fuel was sold tax free for the claim period listed on the Claim for Refund of Motor Fuel Tax.

A person who makes a false statement in any claim under this act, who submits an invoice in support of the claim which upon alteration of changes exist in the date, name, number of gallons, amount of tax paid, or other relevant information, who knowingly presents any claim or invoice containing any false statement, or who collects or attempts to collect a refund, or causes to be paid to another person, without being entitled to it, shall forfeit the full amount of the claim.

**Copies of invoices must be provided upon request.**

**A detailed schedule must also be included indicating each sale on a load by load basis.**

Date of Sale (dd/mm/yy)	Government Entity	Federal Employer Number	Gallons Sold

**This form may be reproduced. You may also submit your own summary provided it includes all of the above information.**