

**Summary
Exempt Sales by Fuel Vendors
To Government Entities and/or Parochial Schools for Student Transportation**

Name of Fuel Vendor _____

Federal Employer Number of Fuel Vendor _____

Please enter the information below for each governmental entity or school to whom the fuel was sold tax free for the claim period listed on the Claim for Refund of Motor Fuel Tax. **Do not include gallons paid for by credit card.**

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 or School Name	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.