STATE OF CONNECTICUT
DEPARTMENT OF REVENUE SERVICES
EXCISE/ PUBLIC SERVICES TAXES UNIT
25 SIGOURNEY STREET
HARTFORD, CT 06102-5031

(Rev. 07/00)

FORM AU-726a

MOTOR VEHICLE FUELS EXPORTER
MONTHLY INFORMATION REPORT
(GASOLINE)

REPORT FOR MONTH ENDING:
CT TAX REGISTRATION NUMBER:

GENERAL INSTRUCTIONS

1. This report must be filed with the Commissioner of Revenue Services not later than the 25th day of the month following the calendar month being reported. Example: The Monthly Information Report for January 1 through January 31 should be filed on or before February 25.

2. Mail to the Department of Revenue Services at the above address.

Name:	
Street:	
City:	State:
Zip:	

SCHEDULE OF GASOLINE PURCHASED IN CONNECTICUT FOR EXPORT		
LICENSED CONNECTICUT DISTRIBUTOR OF GASOLINE	GALLONS PURCHASED	STATE OF DESTINATION

I declare under the penalty of false statement that I have examined this report, **FORM AU-726a**, and, to the best of my knowledge and belief, it is true, complete, and correct. (The penalty for false statement is imprisonment not to exceed one year or a fine not to exceed two thousand dollars, or both.)

Signature: _____ Print Name: _____

Title: _____ Date: _____