

Motor Fuel Tax Alcohol, Compressed Gases, or 1-K Kerosene Sold in Illinois as Motor Fuel

Page	of
i agc	01

				Check the product type you are listing on this page. Report one product type only per page.						
Company name Your license number Reporting period / Liability date			_	LP gas Alcohol						
			_			☐ 1-K kerosene ☐ CNG				
			te//			LNG				
Month Year		Month Last Day of Month	Month Last Day Year of Month			Other (specify:)		
Report your	tax-paid s	ales								
1 Invoice date (month, day, year)	2 Invoice number	3 Name of carrier	4 Bill of lading or manifest number	5 Name of purchaser	6 Origin (City and State)	7 Destination (City and State)	8 Purchaser's license number	9 Invoiced gallons	10 Product Type (Specify/Tax Rate	
1/ _			_		_				_	
2//					_				_	
3//					_				_	
4//					_					
5//					_				_	
6//					_				_	
7//					_				_	
8//					_				_	
9//					_				_	
10//									_	
11 Add the invoice	ed gallons in Co	olumn 9, Lines 1	through 10, and er	iter the total here.				11		
12 If you are filing	only one Sche	edule GA-1 ente	er the amount from L	ine 11 here				12		
If you are repo	rting :NG, also enter	this amount on	Form RMFT-5, Line		lumn 2.					

If you are filing more than one Schedule GA-1, see instructions.