



Illinois Department of Revenue
CMFT-2 Multiple-Site Form

Attach to Form CMFT-1

REV 02 Form 025

Do not write above this line.

Account ID: _____ Reporting Period: _____

	Column A		Column B
	Number of taxable gallons		Amount of tax
You must round your figures to the nearest whole number. See instructions.			
Site where the taxable retail sale was made:			
Location code _____	4 _____ X	=	5 _____
Site name _____		(Tax Rate)	
Site address _____			
City, state, ZIP _____			
Location code _____	4 _____ X	=	5 _____
Site name _____		(Tax Rate)	
Site address _____			
City, state, ZIP _____			
Location code _____	4 _____ X	=	5 _____
Site name _____		(Tax Rate)	
Site address _____			
City, state, ZIP _____			
Location code _____	4 _____ X	=	5 _____
Site name _____		(Tax Rate)	
Site address _____			
City, state, ZIP _____			
Location code _____	4 _____ X	=	5 _____
Site name _____		(Tax Rate)	
Site address _____			
City, state, ZIP _____			
Location code _____	4 _____ X	=	5 _____
Site name _____		(Tax Rate)	
Site address _____			
City, state, ZIP _____			

Column totals (See instructions for multiple pages.)

Enter the total of
 Column A on Line 4
 of Form CMFT-1.

Enter the total of
 Column B on Line 5
 of Form CMFT-1.

This form is authorized by the County Motor Fuel Tax Law. Disclosure of this information is REQUIRED. Failure to provide information may result in this form not being processed and may result in a penalty.

