State of New Jersey Division of Taxation

SCHEDULE D

Sales and/or Use of Special Fuels

This Schedule is to be completed by all persons holding a Seller-User's License and who operate their own dispensing pump.

(Attach Riders if Necessary)

Gallonage Pur		Name of Licensee					Month / Year	
	mp Totalizer Rea	ding(s) of S	pecial Fuels for	r the report mo	nth:			
Product Type * Pump Serial		Number	Closing Tota (End of Re	lizer Reading	(B) Opening Totalizer Reading (Beginning of Report Month)		Gallonage Pumped Column A Minus Column B	
				F	 FOTAL GALLONAGE F	PUMPE	D	
2. IMPORTANT	Please indicareport month	ite below if	there has been	a malfunction	or replacement of a galle	on total	lizer and/or pump duri	ing the
Product Type* Pump			Old Totalizer Reading		New Totalizer Reading	Pu	New mp Serial Number	Date
* Product Type:	1. Kerosene	2. No. 2 fu	al oil	2 Diagol	fuel, No. 1 diesel fuel, No	2 diaz	al fuel and anhanced No	2 fuel e:1: