GAS-1301
5-14

Motor Fuel Transporter Return

North Carolina Department of Revenue

Legal Name *(First 30 Characters) (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS)*

Trade Name

Location **County**

Mailing Address

City **State** **Zip Code** ***(First 5 digits)***

Name of Contact Person **Phone Number** ( ) **Fax Number** ( )

Fill in applicable circles:

- ○ Amended Report
- ○ Final Report
- ○ Address has changed since prior report

FEIN or SSN

○ FEIN ○ SSN

Account Number

Return for Month of

Month - **Year**

Computation of Net Gallons

1. **Total gallons of motor fuels loaded at a North Carolina terminal or bulk plant and delivered to another state** *(Attach Gas 1301DS, Schedule 14A)* ▶ 1.
2. **Total gallons of motor fuels loaded at an out-of-state terminal or bulk plant and delivered in North Carolina** *(Attach Gas 1301DS, Schedule 14B)* ▶ 2.
3. **Total gallons of motor fuels loaded at a North Carolina terminal or bulk plant and delivered in North Carolina** *(Attach Gas 1301DS, Schedule 14C)* 3.
4. **Total gallons of motor fuels transported** *(Add Lines 1, 2, and 3)* ▶ 4.
5. **Penalty for Late Filing** *($50.00)* 5. $ .00

Signature and Title: _____ **Date:** _____

I certify that, to the best of my knowledge, this report is accurate and complete.

Reports are due by the 22nd day after the end of each month.

Any payment must be drawn on a U.S. (domestic) bank and payable in U.S. dollars.

MAIL TO:
North Carolina Department of Revenue
Excise Tax Division
Post Office Box 25000
Raleigh, North Carolina 27640-0950

QUESTIONS:
Contact the Excise Tax Division at:

Telephone Number	(919) 707-7500
Toll Free Number	(877) 308-9092
Fax Number	(919) 733-8654