

**VILLAGE OF OAK LAWN  
OAK LAWN VEHICLE FUEL TAX MONTHLY RETURN  
(FOR RETAIL DEALERS)**

TAX PERIOD: \_\_\_\_\_  
MONTH      YEAR

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ FEIN: \_\_\_\_\_

**REPORT IN GALLONS**

- |     |                                                                                                            |           |
|-----|------------------------------------------------------------------------------------------------------------|-----------|
| 1.  | Vehicle fuel received upon which no tax was collected or paid (as itemized on schedule - see reverse page) | _____     |
| 2.  | Deductions:                                                                                                |           |
|     | a) Sales to local governments                                                                              | _____     |
|     | b) Other deductions authorized by law (Itemize on separate schedule)                                       | _____     |
| 3.  | Total deductions (add 2a through 2b)                                                                       | (_____)   |
| 4.  | Total taxable gallons                                                                                      | _____     |
| 5.  | Tax (Line 4 x \$.06)                                                                                       | \$_____   |
| 6.  | Less credit for commission - 1% of Line 5                                                                  | \$(_____) |
| 7.  | Net tax (Line 5 minus Line 6)                                                                              | \$_____   |
| 8.  | Penalty for late payment (5% of Line 5)                                                                    | \$_____   |
| 9.  | Penalty for late filing (5% of Line 5)                                                                     | \$_____   |
| 10. | Interest for late payment (1% per month of Line 5)                                                         | \$_____   |
| 11. | Total tax, penalty and interest (Line 7 or sum of Lines 5, 8, 9 and 10)                                    | \$_____   |
| 12. | Credit (attach credit letter from Finance Director)                                                        | \$(_____) |
| 13. | Amount Due                                                                                                 | \$_____   |

