FORM M-2
(REV. 1999)

STATE OF HAWAII — DEPARTMENT OF TAXATION

CERTIFICATE OF RETAIL SALES OF LIQUID FUEL

County of _____

Date _____

The undersigned hereby certifies that the taxpayer is the holder of Liquid Fuel Retail Dealer's Permit No._____ that this permit is still in effect, that the statements made in the application for the permit are true, correct and complete as of this date, and that the taxpayer is maintaining the practices and records set forth in the application. Furthermore, during the month of _____, _____, the taxpayer made purchases of liquid fuel from_____ a licensed distributor, and that during the same month the taxpayer made retail sales of liquid fuel as follows:

Street Address and Post Office	Island	Type of Liquid Fuel*	No. of Gallons
		Aviation	
		Diesel	
		LPG	
		Gasoline - Premium	
		Regular	
		Unleaded	
		Gasohol	
		Others	

*Note: THE REPORTING BY DIFFERENT TYPES OF FUEL IS NEEDED FOR STATISTICAL PURPOSES.

Summary for County of Maui by Types of Liquid Fuel and No. of Gallons

Island	Type of Liquid Fuel	No. of Gallons
Maui		
Lanai		
Molokai		

I declare, for myself and for the below named retail dealer, under the penalties provided by Section 243-3(b), HRS, that to the best of my knowledge and belief this certificate is a true, correct and complete statement for the above mentioned period.

_____
Name of Permittee

_____
Signature and title or source of authority

This portion to be completed by licensed distributor.

COMPUTATION OF DEDUCTION ALLOWED BY SECTION 243-10(6), HRS

Gallons of liquid fuel sold at retail			One gallon for every 99 sold at retail		Rate in county		Amount of allowance
. . . . .	÷	99	=	. . . . .	x	. . . . .	= $ . . . . .

NOTE: Prepare this form in DUPLICATE:
Original shall be retained by the licensed distributor.
Copy to be retained by the retail dealer.