



Schedule of Weekly Refund/Reimbursement
Tax Law — Articles 12-A and 13-A

Use this form to report requested weekly refund/reimbursement (from Form(s) AU-629) for the month of **June 2005**.

Name	FEIN
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Read instructions below carefully. Keep a copy of this completed form for your records.

Report your Articles 12-A and 13-A requested weekly refund/reimbursement from Form(s) AU-629, *Application for Refund/Reimbursement of Taxes Paid on Fuel Sold to Governmental Entities by Registered Distributors*, for this month.

	Weekly period Month & day			Column A Article 12-A	Column B Article 13-A
1 Amount of refund/reimbursement from Form AU-629....	_____ to _____	.....	1		
2 Amount of refund/reimbursement from Form AU-629....	_____ to _____	.....	2		
3 Amount of refund/reimbursement from Form AU-629 ...	_____ to _____	.....	3		
4 Amount of refund/reimbursement from Form AU-629 ...	_____ to _____	.....	4		
5 Amount of refund/reimbursement from Form AU-629 ...	_____ to _____	.....	5		
6 Amount of refund/reimbursement from Form AU-629 ...	_____ to _____	.....	6		
7 Totals (add lines 1 through 6 in Columns A and B)			7		
8 Total requested refund/reimbursement for the month (add Columns A and B on line 7 and enter the total here and on Form PT-100, line 10)			8		

Transfer the amount on line 8 to Form PT-100, *Petroleum Business Tax Return*, line 10.

Instructions

Who must file

This schedule must be filed with Form PT-100, *Petroleum Business Tax Return*, by any taxpayer who has filed a Form AU-629 for refund/reimbursement of the Articles 12-A and 13-A taxes.

Use this form to report requested refund/reimbursement of Articles 12-A and 13-A taxes for the month covered by this schedule.

When to file

Form PT-100-B must be filed monthly with Form PT-100, which is due 20 days after the end of the month covered by the form.

Line instructions

Lines 1 through 6 — Enter the weekly period within the calendar month (month and day) and the requested refund/reimbursement amounts from Form(s) AU-629 for each line you complete.

Line 7 — Add the requested weekly refund/reimbursement amounts on lines 1 through 6 in Columns A and B.

Line 8 — Add the amounts on line 7, Columns A and B. Enter the total on line 8 and on Form PT-100, line 10.