**MOTOR CARRIER DIVISION**
**555 WRIGHT WAY**
**CARSON CITY, NV 89711-0600**
**(775) 684-4711**
**fax (775) 684-4619**
**www.dmvnv.com**

## TRANSPORTER SCHEDULE OF DELIVERIES

**Indicate Schedule Type** _____ **See Instructions**

Account Number: _____Company Name: _____ FEIN:_____ Terminal Code _____ Report Period _____

Product Type (Circle One - Complete for **each** product type)

| | | | | | |
|---|---|---|---|---|---|
| 054 | Propane (LPG) | 130 | Jet Fuel | 224 | Compressed Natural Gas (CNG) |
| 065 | Gasoline | 142 | Kerosene | 226 | High Sulfur Diesel - dye added |
| 124 | Gasohol | 161 | Low Sulfur No. 1 Diesel Fuel | 227 | Low Sulfur Diesel Fuel - dye added |
| 125 | Aviation Gasoline | 167 | Low Sulfur No. 2 Diesel Fuel | _____ | Other (see FTA Product Code List) |

| Person Hiring the Carrier | | Seller | | 5 Mode | 6 Origin | Delivered to: | | 9 FEIN | 10 Date Delivered | 11 Document No. | 12 Gross Gallons | 13 Net Gallons |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 Company Name | 2 FEIN | 3 Company Name | 4 FEIN | | | 7 Company Name | 8 Address | | | | | |
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| **TOTALS** | XXXXXXXXX | XXXXXXXX | XXXXXXXX | XXXXXX XXX | XXXXXXXX | XXXXXXXX | XXXXXXXX | XXXXXXXX | XXXXXXXX | XXXXXXXX | | |

MC038TS (12/2004)