

Terminal Operator Report

Corrected Void

For the month ending _____, 20__ .

Part I Terminal Operator

Company name			Employer Identification Number (EIN) :
Address (number, street, room or suite number)			Form 637 Registration Number
City, state, and ZIP code			
Contact person	Daytime telephone number ()	Fax number ()	Email address

Part II Terminal

Name of terminal	Terminal Control Number (TCN)
Terminal location	

Part III Transactions for the Month

	Net Gallons (attach additional schedule(s) if needed) Enter the transactions for the period on Schedules A and B, then complete lines 1 through 7 for each product code (PC). See page 6 of the instructions for the product codes.			
	(a)	(b)	(c)	(d)
	PC:	PC:	PC:	PC:
1 Beginning inventory.				
2 Total receipts. Enter the total net gallons from Schedule(s) A, column (f), by product code.				
3 Total gallons available. Add lines 1 and 2.				
4 Total disbursements. Enter the total net gallons from Schedule(s) B, column (e). If you have disbursements for more than one position holder for a product code, add the amounts from each position holder's Schedule B and enter the combined total by product code here.				
5 Subtract line 4 from line 3.				
6 Stock gains and losses. Show losses in (parentheses).				
7 Actual physical ending inventory at terminal.				

Under penalties of perjury, I declare that I have examined this return and accompanying schedules, and, to the best of my knowledge and belief, they are true, correct, and complete.

Signature ► _____ Title, if applicable ► _____ Date ► _____

Type or print your name below signature.

Terminal operator name as shown on Form 720-TO

EIN

TCN

For the month ending (enter MM/DD/YYYY)

Schedule A Terminal Operator Receipts

1 Product code (PC). Enter the product code from page 6 of the instructions. A separate schedule is required for each PC . . . ▶

1

Page _____ **of** _____
For more than one Schedule A, for each different PC, number each sheet. For example, 1 of 4, 2 of 4, etc.

2 Enter in the columns below the information requested for the PC on line 1 above.

(a) Carrier name	(b) Carrier EIN	(c) Mode of transportation	(d) Document date	(e) Document number	(f) Net gallons

3 Total. Add all amounts in column (f) for each different PC. If there is more than one page for a PC, add the amounts from each page and enter the result on the last page of Schedule A for that PC. Do not enter page subtotals. Also, include the amount from column (f) on Form 720-TO, line 2, in the column for the applicable PC ▶

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Terminal operator name as shown on Form 720-TO	EIN	TCN	For the month ending (enter MM/DD/YYYY)
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Schedule B Terminal Operator Disbursements by Position Holder

Position holder (PH) name. Enter one name per page.	PH EIN	PH Form 637 Registration Number	Page _____ of _____ For more than one Schedule B, for each different PC, DS, or MT, number each sheet. For example, 1 of 4, 2 of 4, etc.
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Complete lines 1 through 4 for each product code.

1 Product code (PC). Enter the product code from page 6 of the instructions. A separate schedule is required for each PC ▶	1	
2 Destination state (DS). Enter the destination state for each product code from page 7 of the instructions. A separate schedule is required for each PC by state. PC 167 destined for Virginia (VA) and Maryland (MD) requires 2 schedules ▶	2	
3 Mode of transportation (MT). Enter the mode of transportation (see page 3 of the instructions) for each product code for each destination state. PC 167 destined for Virginia by truck and rail and destined for Maryland by truck and rail would require four separate schedules: (1) PC 167, VA, rail; (2) PC 167, VA, truck; (3) PC 167, MD, rail; and (4) PC 167, MD, truck ▶	3	

Example. ABC Terminal is preparing Schedule B for disbursements made by position holder XYZ. XYZ disburses gasoline (PC 065), diesel fuel #2 low sulphur undyed (PC 167), and jet fuel (PC 130) during the month destined for two states by truck. ABC must prepare six Schedules B to report XYZ's transactions (3 product codes x 2 destination states). A further breakdown by mode of transportation is not needed because only truck was used.

4 Enter in the columns below the information requested for the product code on line 1 above.

(a) Carrier name	(b) Carrier EIN	(c) Document date	(d) Document number	(e) Net gallons	(f) Gross gallons

5 Totals. Add all amounts in columns (e) and (f) for each PC, DS, or MT. If there are two modes of transportation for a product destined for one state, or if a product is destined for two states, then two Schedules B and totals are required. If there is more than one Schedule B for a PC, DS, or MT, add the amounts from each schedule and enter the result on the last page of Schedule B for each different PC, DS, or MT. Do not enter page subtotals. Also include the amount from column (e) for each PC on Form 720-TO, line 4, in the column for the applicable PC ▶	5e		5f	
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