

CITY OF DECATUR Multiple Location Reporting Local Motor Fuel Tax



Business Name	IBT#	
	-	Total Gallons
Location Name or Address	Non-Diesel	Diesel
*Total		
*Total	Column 1	Column 2

*Transfer totals of corresponding gallons to line 1 of the Local Motor Fuel Tax Return form LMFTR1.

If combining multiple locations on the City of Decatur Local Motor Fuel Tax Return, **you must also include this form.**