

Division use only — DLN Stamp

Division use only — Date Stamp



State of New Jersey

Send to:

Division of Taxation

PO Box 189
Trenton, NJ 08695-0189

MM	YYYY
Period	

Pursuant to NJSA 54:39-101 et seq

Rev 08-2014

MFA-15

Government Fleetcard Reimbursement Request

Registrant

Registrant ID #

Registrant's Address

Street	City, State Zip
<input type="text"/>	<input type="text"/>

	Gallons Purchased w/ Credit		Amount of Reimbursement
1	Sales of Gasoline From Form MFA199	x 10½¢	\$ <input type="text"/>
	Multiply the number of gallons of Gasoline by .105 and enter result.....		
2	Sales of Diesel From Form MFA299	x 13½¢	\$ <input type="text"/>
	Multiply the number of gallons of Diesel by .135 and enter result.....		
3	Sales of LPG From Form MFA399	x 5¼¢	\$ <input type="text"/>
	Multiply the number of gallons of LPG by .0525 and enter result.....		
4	Sales of AvFuel @ GAA's From Form MFA499	x 2¢	\$ <input type="text"/>
	Multiply the number of gallons of Aviation Fuel by .02 and enter result.....		
5	Total Amount of Reimbursement Requested		\$ <input type="text"/>
	Add Reimbursements from lines 1 through 4 and enter result.....		

	mm
	YYYY
	Registration #
	MFA-15
	Registrant

I declare under the penalties provided by law, that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge is a true, correct, and complete return. If the return is prepared by a person other than the taxpayer, his declaration is based on all the information relating to the matters required to be reported in the return of which he has knowledge.

Printed Name of Company Officer		Signature of Company Officer	
Title			
Date			

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10-2010

MFA199

Schedule of Fleetcard Purchases of Gasoline

You must group data alphabetically by Customer. If more than 25 Customers, use additional MFA199's

Registrant

Registrant ID#

	Customer	Customer Acct#	Merchant	Merchant ID #	Product	Gallons
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						

mm		Period
yyyy		
	of	page
		pages
on this page		First Seller
on this page		Last Seller

Gasoline Schedule

MFA199

Form

Registrant

Total Gallons This Page	
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Total Gallons This Schedule <i>Report this amount on line 1 of MFA-15</i>	
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10-2010

MFA299

Schedule of Fleetcard Purchases of Diesel

You must group data alphabetically by Customer. If more than 25 Customers, use additional MFA299's

Registrant

Registrant ID#

	Customer	Customer Acct#	Merchant	Merchant ID #	Product	Gallons
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						

mm

yyyy

Period

page

of

pages

First Customer

on this page

Last Customer

on this page

Diesel Schedule

MFA299

Form

Total Gallons This Page

Total Gallons This Schedule
Report this amount on line 2, MFA-15

Registrant

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Period	
mm	yyyy

Pursuant to NJSA 54:39-101 et seq
10-2010

MFA399 Schedule of Fleetcard Purchases of LPG

You must group data alphabetically by Customer. If more than 25 Customers, use additional MFA399's

Registrant

Registrant ID#

	Customer	Customer Acct#	Merchant	Merchant ID #	Product	Gallons
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						

mm		Period
yyyy		page
	of	pages
on this page		First Customer
on this page		Last Customer
LPG Schedule		Form
MFA399		Registrant

Total Gallons This Page	
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Total Gallons This Schedule <i>Report this amount on Line 3, MFA-15</i>	
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10-2010

MFA499

Schedule of Fleetcard Purchases of AvFuel

You must group data alphabetically by Customer. If more than 25 Customers, use additional MFA499's

Registrant

Registrant ID#

	Customer	Customer Acct#	Merchant	Merchant ID #	Product	Gallons
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						

mm		Period
yyyy		page
	of	pages
on this page		First Customer
on this page		Last Customer
AvFuel Schedule		Form
MFA499		Registrant

Total Gallons This Page	
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Total Gallons This Schedule <i>Report this amount on Line 3, MFA-15</i>	
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10-2010

MFA599

Schedule of New Fleetcard Customers

You must group data alphabetically by Customer. If more than 30 Customers, use additional MFA599's

Registrant

Registrant ID#

Custom

Acct#

Address

City

Zip

Phone

1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
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15					
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