(Rev. January 2004)

Terminal Operator Report

OMB No. 1545-1734

Department of the Treasury Internal Revenue Service		For the month ending , 20 .				Corrected	☐ Void			
Par		perator					l .			
Compa	any name			Employer Identifica				ation Number (EIN)		
Address (number, street, room or suite number)				Form 63	Form 637 Registration Number					
City, s	tate, and ZIP code									
Contact person Daytime tel		ephone number	Fax number	Email a	Email address					
Par	II Terminal	,		,						
Name of terminal				Termin	Terminal Control Number (TCN)					
Termin	al location				-					
Par	III Transactio	ns 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) PC:	PC:) PC:	(c)	PC:	d)		
1	Beginning inventor	y.								
2	Total receipts. Engallons from Scheroft), by product cod	dule(s) A, column								
3	Total gallons availa	ble. Add lines 1								
4	Total disbursement net gallons from Sc column (e). If you he for more than one product code, add each position holde enter the combined code here.	hedule(s) B, ave disbursements position holder for a the amounts from r's Schedule B and								
5	Subtract line 4 from line 3.									
6	Stock gains and lo losses in (parenthe									
7 Actual physical ending inventory at terminal.										
and co	mplete.	clare that I have examined		. 3 0	•	,		true, correct,		
	or print your name be		пие, п ар	ріісаріс 🚩			Date F			

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erminal operator name as shown on Form 720-TO	EIN		TCN	For the month	ending (enter MM/DD/YYYY)
Schedule A Terminal Operator Receipts					
I Product code (PC). Enter the product code nstructions. A separate schedule is required f	from page 6 of the for each PC	F	Page For more than one Sexample, 1 of 4, 2 of	of Schedule A, for each different PC f 4, etc.	C, number each sheet. For
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 eapage and enter the result on the last page of column (f) on Form 720-TO, line 2, in the column	Schedule A for that I	PC. Do not enter pag	ge subtotals. Also	, include the amount from	3

Form 720-TO (Rev. 1-2004)					□ Corrected □ Voi	d	Page 3	
Terminal operator name as shown on Form 720-TO	EIN		TCN		For the month ending (enter MM/DD	/YYYY)	
Schedule B Terminal Operator Disbursemen	ts by Position Holder	T						
Position holder (PH) name. Enter one name per page.	PH EIN	PH Form 637			of			
					nan one Schedule B, for each different PC, DS,			
				or MT, number	each sheet. For examp	ole, 1 of 4, 2	? of 4, etc.	
Complete lines 1 through 4 for each product code.	and (of the instructions A		ula la mamulmad fam agal	. DC	1			
1 Product code (PC). Enter the product code from p		<u> </u>	<u> </u>					
2 Destination state (DS). Enter the destination state each PC by state. PC 167 destined for Virginia (VA) and			instructions. A separa	te schedule is re	equirea for	,		
3 Mode of transportation (MT). Enter the mode of			os) for each product o	ada far aach da		•		
PC 167 destined for Virginia by truck and rail and destin								
(2) PC 167, VA, truck; (3) PC 167, MD, rail; and (4) PC 1	67, MD, truck		julic lour separate ser		3			
Example. ABC Terminal is preparing Schedule B fo		osition holder XV	/7 XY7 disburses das	soline (PC 065)	diesel fuel #2 low si	ılphur und	ved	
(PC 167), and jet fuel (PC 130) during the month des								
destination states). A further breakdown by mode of					(,)			
4 Enter in the columns below the information requested	I for the product code on lin	e 1 above.						
(a)	(b)	(c)	(0	d)	(e)		(f)	
Carrier	Carrier	Docume	ent Docu	ıment	Net		ross	
name	EIN	date	num	nber	gallons	ga	llons	
5 Totals. Add all amounts in columns (e) and (f) for	each PC, DS, or MT. If the	re are two mod	es of transportation f	or a product				
destined for one state, or if a product is destined for tw	vo states, then two Schedu	les B and totals	are required. If there	is more than				
one Schedule B for a PC, DS, or MT, add the amounts								
each different PC, DS, or MT. Do not enter page subto line 4, in the column for the applicable PC	otals. Also include the amou	in irom column	(e) for each PC on F	orm /20-10,	5e	5f		
in a 1, in the column for the applicable i o				_		1 0.		