

PST-2 Prepaid Sales Tax Statement of Tax Paid

Copy A Retailer's copy Attach to ST-1

1 Reseller's busi	ness name						
2 Reseller's Acco	ount ID		·	3 Period covered	/		·
Step 2: Retaile	r's informati	on			Month	Year	
•							
5 Retailer's busin	iess address	Number and street	Cit	/		State	Zip
				7 Phone number(_)_		·
Step 3: Figure	your prepaid	d tax (Do not write n	negative amounts.)				
8 Biodiesel blend	s (1% - 10%) sul	bject to prepaid sales	s tax				
	al number of gal			8a			
b Multiply Line	8a by	·			8b		
9 Other motor fu	el subject to pre	paid sales tax					
a Enter the total	al number of gal	llons.		9a			
b Multiply Line	9a by	·			9b		
10 Add Lines 8b a	nd 9b. This is yo	our total prepaid tax			10		
PST-2 (R-07/17)		zed as outlined under the Act imp to provide information may result					
	Department of Prepaid		d.				Copy B Retailer's file copy
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PST-2 Step 1: Reselle 1 Reseller's busin 2 Reseller's According	Prepaid Stateme er's informat ness name	Sales Tax ent of Tax Paid ion		3 Period covered	/	Year	
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PST-2 Step 1: Reselle 1 Reseller's busin 2 Reseller's Accord Step 2: Retaile 4 Retailer's busin	Prepaid Stateme er's information of the statement of the	Sales Tax ent of Tax Paid ion		3 Period covered	Month	Year	
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PST-2 Step 1: Reselle 1 Reseller's busin 2 Reseller's Acco Step 2: Retaile 4 Retailer's busin 5 Retailer's busin 6 Retailer's Acco Step 3: Figure 8 Biodiesel blend	Prepaid Stateme er's informationess name r's informationess name ress address unt ID round ID	Sales Tax Paid Ion Ion Number and street d tax (Do not write in bject to prepaid sales)	City	3 Period covered	Month	Year	Retailer's file copy
PST-2 Step 1: Reselle 1 Reseller's busin 2 Reseller's Acco Step 2: Retaile 4 Retailer's busin 5 Retailer's busin 6 Retailer's Acco Step 3: Figure 8 Biodiesel blend a Enter the tota	Prepaid Stateme er's informationess name pount ID prepaid ess name press address press address prepaid es (1% - 10%) suital number of gallowers of gallowers and the statement of gallowers and gallowers and gallowers and gallowers and gallowers and	Sales Tax Paid Interest Intere	City	3 Period covered 7 Phone number(_	/	Year	Retailer's file copy
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Illinois Department of Revenue

Prepaid Sales Tax Statement of Tax Paid

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Step	1:	Resel	ler's	infor	mation
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Step 1: Reseller's informa	ation					
1 Reseller's business name						-
2 Reseller's Account ID		_ 3 Period covered	/			
Step 2: Retailer's informa	ntion		Month	Year		
4 Retailer's business name _						_
5 Retailer's business address						_
				State	Zip	
6 Retailer's Account ID)_			-
Step 3: Figure your preparation	aid tax (Do not write negative a	amounts.)				
8 Biodiesel blends (1% - 10%) a Enter the total number of combon b Multiply Line 8a by	gallons.	8a	 8b		<u>.</u>	
9 Other motor fuel subject to p a Enter the total number of g	orepaid sales tax gallons.	9a	 9h			
b Multiply Line 9a by	your total prepaid tax.				·_	
	horized as outlined under the Act imposing the tax ure to provide information may result in this form n		of this information			
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Prepaid Sales Tax Statement of Tax Paid

Step 1: Reseller's information 1 Reseller's business name

2 Reseller's Account ID	3 Period covered _	/		
Step 2: Retailer's information		Month	Year	
4 Retailer's business name				
5 Retailer's business address				
Number and street	City		State	Zip
6 Retailer's Account ID	7 Phone number(_)_		
Step 3: Figure your prepaid tax (Do not write negative ar	mounts.)			
8 Biodiesel blends (1% - 10%) subject to prepaid sales tax				
a Enter the total number of gallons.	8a			
b Multiply Line 8a by		8b		
9 Other motor fuel subject to prepaid sales tax				
a Enter the total number of gallons.	9a			
b Multiply Line 9a by		9b _		<u>-</u>
10 Add Lines 8b and 9b. This is your total prepaid tax.		10		