

STATE OF OKLAHOMA
LP GAS RESEARCH, MARKETING AND SAFETY COMMISSION

IMPORTER
ASSESSMENT REPORT AND REMITTANCE FORM
This report must be completed and returned to the Commission no later than the 25th day of the month following the date of import as indicated below.

IMPORTER: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

The enclosed remittance applies to liquefied petroleum gas (LPG) imported into Oklahoma during the following period: _____, _____
month year

Gallons Imported into Oklahoma	_____
Times Assessment rate	X .005¢
Total Amount Due	\$ _____

The assessment due by the above named importer is hereby remitted to the Oklahoma LP Gas Research, Marketing and Safety Commission.

I hereby declare that I am authorized to sign this report and that the information stated herein is true, correct and complete to the best of my knowledge.

_____ Authorized Signature	_____ Phone #
_____ Print Name	_____ Date

Return To: Oklahoma LP Gas Research, Marketing and Safety Commission
6412 N Santa Fe Ave, Suite C
Oklahoma City OK 73116-9111
(405) 879-9828 Fax (405) 879-0304

This form may be duplicated as needed.