

ALBERTA INDIAN TAX EXEMPTION RETAILER REFUND APPLICATION

To be completed by a retailer requiring a refund for tax exempt sales made to eligible Alberta Indians or Indian Bands. This form must be submitted no more frequently than weekly to Alberta Finance, Tax and Revenue Administration, 9811 109 ST, EDMONTON AB T5K 2L5. Refunds of less than \$20 will not be processed unless specifically requested. Copies of this application, purchase invoices, and sales vouchers must be retained for audit purposes. You must submit the purchase invoices and may be required to submit sales vouchers with your refund application. If you have any questions, please phone (780)427-3044. If calling long distance within Alberta, call 310-0000 then enter (780) 427-3044.

Aff	ix mailing label in this box or print name and address.	8.	8. For Office Use Only 1				
1.	Indian Tax Exemption Business Identification Number						
1.0	- 0						
	= Occurrance #						
2.	Legal Name of Business	9.	Claim Period (minimum 7 day period)				
		-	Beginning:				
3.	Business or Operating Name (if different from legal name)						
4.	Mailing Address	_	Ending:				
		10.	Have you ceased operations and is this your				
		-	final claim?				
	City/Tow n Province Postal Code			D			
			specify date that operations ceased:				
5.	Specify any changes to your Operating Name						
-		11. Is this an amended claim?					
6. ■	Specify changes to mailing address, telephone or fax number:		Yes No				
		12.	If you are required to submit supporting				
		•	documents, please indicate which document	S			
	City/Tow n Province Postal Code	-	are attached.				
		_	Purchase invoices				
	Telephone:	_					

Please complete page 2 before completing lines 13-16 below .

Total Exemptions Claimed

Enter the applicable carry forward amounts from page 2. If there is no carry forward amount for line 13, 14 or 15, enter \$0.00.

- 13. Tobacco \$ _____
- 14. Fuel \$ _____
- 15. Propane \$ _____

\$ ____

(To reduce processing costs, refunds of less than \$20.00 will normally not be paid. Upon specific request, Tax and Revenue Administration will refund a balance of less than \$20.00.)

CERTIFICATION

I hereby certify that, to the best of my knowledge and belief, the information contained in this application, supporting vouchers and purchase invoices is true and correct and that all relevant facts have been revealed.

Signature:

Date:

16. Total Refund

			Тах	Exempt	Sales						
Tax and Rever	nue Administration	may require t	the submission	of sales vouc	hers to process yo	ur claim.					
1 7	Daily Tobacco Exemptions (Black Stock and Not Marked)			Daily Fu	el Exemptions	1	Daily Propane Exemptions				
Date	■ 18 ■ 19		9	■ 20 ■ 21			■ 22				
	No.of Vouchers	Tax Exe	mption No.	No. of Vouchers Tax Exe		No. of Vou	thers Tax Exemption				
					I I I						
Total		Α			В		с				
	Carry tot	al A to field 13 page 1	on	Carry total B to field 14 on Ca page 1		arry total C to field 15 on page 1					
				Purchase	es.						
Record each invoice for the purchase of black stock and not marked tobacco products, fuel (gasoline and diesel) and propane. If there were no purchases for any one of the following categories (i.e. black stock and not marked tobacco, fuel or propane), then check the "no purchases" box. Refer to Supplier Listing for appropriate Supplier Code. Refer to Product Listing for appropriate Product Code. Tax and Revenue Administration requires that you submit your purchase invoices before your claim can be processed. Image: Program in the period Propane Invoices Propane Invoices No purchases of Black Stock or Not Image: No purchases of propane											
Date	Marked Tobacco during the period				ourchases of fuel dur		during the period				
(YYYY/MM/DD)	■ 25 Supplier Code	■ 26 Product Code	■ 27 Quantity	■ 28 Supplier Cod	■ 29 le Product Code	■ 30 × Litres	31Supplier Code	■ 32 Litres			