



Department of Taxation and Finance

# Prepaid Sales Tax – Motor Fuel Wholesaler’s Detail Report

# FT-945/1045-W

(12/21)

**1022**

Read instructions (Form FT-945/1045-I) carefully. Keep a copy of your completed form for your records.  
The MCTD is the Metropolitan Commuter Transportation District.

Legal name	Sales tax vendor identification number
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## Part 1 – MCTD wholesalers – Purchase information

Date of purchase	Seller’s name	Seller’s EIN	Loading site (street, city, state, ZIP code)	Product code *	Bill of lading number	Terminal control number (TCN)	Total gallons purchased
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

Total gallons from attached sheets (if applicable) .....	
Total gallons purchased (enter here and on Form FT-945/1045, line 35; if no activity, enter 0) .....	

## Part 2 – MCTD wholesalers – Sale information

Date of sale	Purchaser’s name	Purchaser’s EIN	Delivery address (street, city, state, ZIP code)	Product code *	Bill of lading number	DEC bulk storage site number	Total gallons sold
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

Total gallons from attached sheets (if applicable) .....	
Total gallons sold (enter here and on Form FT-945/1045, line 39a; if no activity, enter 0) .....	

\*From Publication 902, Product Codes for Fuels.

Legal name	Sales tax vendor identification number
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**Part 3 – Non-MCTD wholesalers – Purchase information**

Seller's name	Loading site (city, state)	Seller's EIN	Product code *	Total gallons purchased
_____	_____			
_____	_____			
_____	_____			
_____	_____			
_____	_____			
_____	_____			
_____	_____			
_____	_____			
_____	_____			
_____	_____			
_____	_____			
_____	_____			
_____	_____			
_____	_____			
_____	_____			
_____	_____			
Total gallons from attached sheets (if applicable) .....				
Total gallons purchased (enter here and on Form FT-945/1045, line 35; if no activity, enter 0) .....				

\*From Publication 902, Product Codes for Fuels.