Revenue Division		2350 Albert Stre	2350 Albert Street Regina, SK S4P 4A6			
Account Number:		EFILE Code:	EFILE Code:		ksheet)	
Return Period		Due Date		Account Balance ( Box <b>D</b> from wor		
				Remittance Enclo		
<ul><li>► Has you</li><li>► Pleas</li><li>it with</li><li>► Penalty</li></ul>	ur Business Clo se complete the Ch h your payment and	d herein is to the best of mesed, or Address (ange Notification belo	Changed? w and return		,	
		return must be fil	ed.			
	,		9993 0509 109	<ul> <li>Make paym</li> </ul>		ost Banks/Credit Unions e Minister of Finance this return
	TCHEWAN urn Period	FUEL TAX R	ETURN WORKSH  Last Payment Received			ration and return the stub above with your payment∠
	ann choa	Due Duie	Lact i dymone recontrol	Return	Last Return Processe	ed
STEP 1	<ul> <li>Total Tax Payable</li> <li>▶ Enter the total fuel tax payable for the return period.</li> <li>Interim Tax Paid</li> <li>▶ Enter the fuel tax paid for the first fifteen days of this return period.</li> <li>Net Tax Payable (Box A minus B)</li> </ul>					A Total Tax Payable  B Interim Tax Paid  C Net Tax Payable (A - B)
0750.0	Account Balance (As of the date this form was printed.) Add if positive, subtract if negative.					D Account Balance
STEP 2	Net Amount Payable (Box C plus or minus box D)					E Net Amount Payable (C + or - D)
STEP 3	Remittance Er	nclosed hyable for this period,	F Remittance Enclosed			
	AE MOTIFIO	ATION	Please transier y			n the stub below with your new information. △
_	SE NOTIFIC					
Busi	ness Closed: (	Check the box & provide of	details below)	Address / Nam	ie Change: (Check	the appropriate box & provide details below)
Date of Closure:	(MM DD YYYY)			Mailing	Busine	ess Name Location
Reason for Closure	e:			Business Name (If Applic	able):	
If business was sold, please provide details below.					et or Post Office Box	
Purchaser Name:				City:		Province Postal Code:
Purchaser Phone N	number			Phone Number:		
WEBSITE: www.gov.sk.c	<b>EFII</b> ca/finance www	<b>_E:</b> w.gov.sk.ca/finance/reve	inquiries: enue/efile (306) 787-664	95 or 1-800-667-6102	<b>FAX:</b> (306) 787-9644	EMAIL: 4 sask.tax.info@finance. gov.sk.ca

Return

**Please Print Clearly in Boxes Below.** 

Saskatchewan

**FUEL TAX**