



FUEL RETAILER'S REPORT

FORM NN-RET

TIN / SSN : # _____

Taxpayer Name	Reporting Period (Quarter)
Mailing Address	Telephone Number ()
Physical Address	License Number

Date	Distributor	BOL #	Manifest #	Type of Fuel	Net Gallons

	Total This Page :	
Page _____ of _____	Total From NN-RET-A :	
<i>Note: Attach Additional Pages If Necessary</i>	Grand Total :	

I declare that the information contained in this document and any attachments thereto is true and correct to the best of my knowledge and belief pursuant to all Navajo Nation laws and regulations.

x _____	_____	() _____	_____ / ____ / ____
Taxpayer or Duly Authorized Agent Signature	Print or Type Name	Telephone Number	Date