



ALABAMA DEPARTMENT OF REVENUE
BUSINESS & LICENSE TAX DIVISION

P.O. Box 327560 • Montgomery, AL 36132-7560 • (334) 353-7827
Online filing available at www.myalabamataxes.alabama.gov

Acct. # _____

Month _____

Year _____

Coal Transporters Report

TITLE 40, CHAPTER 13, ARTICLES I & II

FEIN: _____ SSN: _____ Telephone: _____

Name: _____ Contact Person: _____

Address: _____ City: _____ State: _____ ZIP _____

Check here if new address

SHIPMENT DATE	TONS TRANSPORTED	TRANSPORTED FOR	PLACE OF ORIGIN	TRANSPORTED TO (DESTINATION)
		NAME: ADDRESS: CITY: ST.: ZIP:	MINE NAME: ADDRESS: CITY: ST.: ZIP:	COMPANY: ADDRESS: CITY: ST.: ZIP:
		NAME: ADDRESS: CITY: ST.: ZIP:	MINE NAME: ADDRESS: CITY: ST.: ZIP:	COMPANY: ADDRESS: CITY: ST.: ZIP:
		NAME: ADDRESS: CITY: ST.: ZIP:	MINE NAME: ADDRESS: CITY: ST.: ZIP:	COMPANY: ADDRESS: CITY: ST.: ZIP:
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		NAME: ADDRESS: CITY: ST.: ZIP:	MINE NAME: ADDRESS: CITY: ST.: ZIP:	COMPANY: ADDRESS: CITY: ST.: ZIP:

AFFIDAVIT

I hereby certify under penalty of perjury that I am duly authorized to make this tax return; and that the information herein contained is true and correct.

Signed _____

Title _____