

TRANSPORTER'S AND STORER'S MONTHLY REPORT  
(L P G)

Report of:  
Address:

Month of:  
Product:

Storage Area No.

SECTION I TOTAL RECEIPTS, DELIVERIES, SHORTAGE & STOCKS IN GALLONS

Opening Stock	Receipts	Deliveries	Shortage	Closing Stocks

SECTION II RECEIPTS

Received from (Company)	Point of Origin	Gallons

TOTALS

SECTION III DELIVERIES

To Whom (Company)	Destination

TOTALS

CERTIFICATE: I, the undersigned, under the penalty of perjury, state that I am the \_\_\_\_\_ of the \_\_\_\_\_, and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date