



Please review all instructions and visually confirm your data as you enter. This Pdf form provides auto-fill calculations in all box areas highlighted in yellow. Do not attempt to revise any totals in yellow boxes. If a revision is needed, please re-enter your data in the correct box/line. Thank you. This form can be automatically submitted via email. There are several ways to make payment. See instructions.

NORA-782C REPORT OF PRIME WHOLESALER/SUPPLIER OF OILHEAT

PRODUCT SOLD FOR LOCAL CONSUMPTION / SCHEDULE 1

IDENTIFICATION DATA

- 1. COMPANY _____
- 2. NAME OF CONTACT PERSON _____
- 3. MAIL ADDRESS _____ PHYSICAL STREET ADDRESS _____
- 4. CITY _____ STATE _____ ZIP CODE _____

ΕΛΛΗΝΙΚΗ ΔΗΜΟΚΡΑΤΙΑ ΟΙΚΟΝΟΜΙΚΟ ΚΑΙ ΑΝΤΙΝΑΡΚΗΤΙΚΟ ΥΠΟΥΡΓΕΙΟ

REPORT INFORMATION

- 6. TYPE OF REPORT: Original Revision to Report Dated (Month/Year) _____
- 7. REPORT FOR: Month _____ OR Quarter 1Q (Due 4/25) 2 Q (Due 7/25) 3Q (Due 10/25) 4Q (Due 1/25) Year _____
- 8. I am reporting for: The single state of _____ More than one state How many states? _____
- 9. Date of Report _____

10. Your Total NORA Assessment _____

LINE 10. WILL AUTO-FILL UPON YOUR COMPLETION OF SCHEDULE 2.

- 11. Which of the Following Best Describes the Firm at the End of This Reporting Period
 a. In Operation b. Temporarily Inactive c. Sold or Leased d. Permanently Closed

- 12. PREPARED BY: same as contact person named below

13. PREPARER'S NAME _____

14. PREPARER'S TELEPHONE _____ FAX _____ E-MAIL _____

15. DATE FORM PREPARED _____

SUBMIT BOTH THIS SCHEDULE AND SCHEDULE 2 WITH REMITTANCE TO "NATIONAL OILHEAT RESEARCH ALLIANCE." PLEASE CHECK HOW YOU ARE SENDING PAYMENT.

- BY MAIL:** National Oilheat Research Alliance 304 Main Ave, #405, Norwalk, CT 06851 Date Mailed _____
- BY COURIER:** National Oilheat Research Alliance 304 Main Ave, #405, Norwalk, CT 06851 Date Sent _____
- VIA ACH:** For routing number and account number for ACH, please contact mdevine@noraweb.org Date Transferred _____
- VIA ELECTRONIC FUNDS TRANSFER (ETF):** please contact mdevine@noraweb.org Date Transferred _____

PLEASE NOTE: If you complete this form on computer, you may submit automatically to NORA's accounting office by clicking on "SUBMIT" box. Keep a copy for your records. If your email server does not honor this function, save to desktop and email your saved Pdf file to: payment@noraweb.org

SUBMIT SCHEDULES 1 AND 2 VIA EMAIL

PLEASE TAKE NOTICE: Filing of this form with submittal of NORA assessment monies is mandatory as required by Public Law 106-469, the National Oilheat Research Alliance Act of 2000, as amended by PL No: 113-79, 2014 and PL No. 115-344, 2018

This report and the information and data contained herein (collectively, the "Report") constitutes confidential, proprietary information and shall be kept confidential. The disclosure of the Report by any officer, employee, agent, member, affiliate, successor or any other representative of NORA is strictly prohibited without the prior written consent of the information provider.



Review instructions and visually confirm data as you enter. Position cursor in box to enter data. Press TAB key after each data entry. Tab key moves down within each state. Do not use return key. Do not use comma to separate 000's. (They show as you proceed to each entry.) This Pdf form uses auto-fill calculations in all boxes highlighted in yellow. If a revision is needed, re-enter your data in the correct box, press tab key. This form can be submitted automatically via email. There are several ways to make payment. See Schedule 1. We recommend frequent "Save" commands.

NORA-782C SCHEDULE 2

REPORT OF PRIME WHOLESALER/SUPPLIER OF OILHEAT

IDENTIFICATION DATA Please use checkbox to indicate if you are filing for a specific month or a quarter.

Company _____

Reference: Month Quarter Year _____ Type of Report: (1) Original (2) Revision to Report Dated (Month/Year): _____

<i>Enter All Data In Gallons</i>	<i>Connecticut</i>	<i>Maine</i>	<i>Massachusetts</i>	<i>New Hampshire</i>	<i>Rhode Island</i>	<i>Vermont</i>	<i>Delaware</i>
1. #1 and/or #2 Distillate (Dyed)							
2. Kerosene (Dyed)							
3. #4 Distillate (Dyed)							
4. Dyed Biodiesel							
5. Total Oilheat Sales (Lines 1 to 4)							
6. Prior Period Overpayment							
7. Non Oilheat To Consumers							
8. Other Adjustments (describe)							
9. Oilheat Sales (Line 5 less 6,7,8)							
10. NORA \$.002 gallon							

<i>Enter All Data In Gallons</i>	<i>Dist. of Columbia</i>	<i>Kentucky</i>	<i>Michigan</i>	<i>Maryland</i>	<i>New Jersey</i>	<i>New York</i>	<i>Pennsylvania</i>
1. #1 and/or #2 Distillate (Dyed)							
2. Kerosene (Dyed)							
3. #4 Distillate (Dyed)							
4. Dyed Biodiesel							
5. Total Oilheat Sales (Lines 1 to 4)							
6. Prior Period Overpayment							
7. Non Oilheat To Consumers							
8. Other Adjustments (describe)							
9. Oilheat Sales (Line 5 less 6,7,8)							
10. NORA \$.002 gallon							

<i>Enter All Data In Gallons</i>	<i>Virginia</i>	<i>North Carolina</i>	<i>South Carolina</i>	<i>Ohio</i>	<i>Wisconsin</i>	TOTALS FOR REPORTED STATES
1. #1 and/or #2 Distillate (Dyed)						
2. Kerosene (Dyed)						
3. #4 Distillate (Dyed)						
4. Dyed Biodiesel						
5. Total Oilheat Sales (Lines 1 to 4)						
6. Prior Period Overpayment						
7. Non Oilheat To Consumers						
8. Other Adjustments (describe)						
9. Oilheat Sales (Line 5 less 6,7,8)						
10. NORA \$.002 gallon						

USE SUBMITTAL BUTTON ON SCHEDULE 1 TO FILE BOTH SCHEDULE 1 AND SCHEDULE 2 ELECTRONICALLY. REFER TO SCHEDULE 1 FOR REMITTANCE OPTIONS AND PROCEDURES. IF YOU FILE FORMS ELECTRONICALLY, REMEMBER TO SUBMIT PAYMENT UNDER PROCEDURE YOU SELECT.

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NORA-782C SCHEDULE 2 SUMMARY

REPORT OF PRIME WHOLESALER/SUPPLIER OF OILHEAT

IDENTIFICATION DATA

Company _____

Reference: Month Quarter Year _____ Type of Report: (1) Original (2) Revision to Report Dated (Month/Year): _____

THIS IS A SUMMARY SHEET FOR ADMINISTRATIVE USE BY NORA ACCOUNTING. IT WILL AUTO-FILL AS ENTRIES ARE MADE BY REPORTING COMPANY ON SCHEDULE 2. IT WILL AUTOMATICALLY BE SUBMITTED TO NORA WHEN FILING SCHEDULES ELECTRONICALLY BY USING THE SUBMIT BOX ON SCHEDULE 1.

NORA .002	<i>CT</i>	<i>ME</i>	<i>MA</i>	<i>NH</i>	<i>RI</i>	<i>VT</i>	<i>DE</i>
NORA .002	<i>DC</i>	<i>KY</i>	<i>MI</i>	<i>MD</i>	<i>NJ</i>	<i>NY</i>	<i>PA</i>
NORA .002	<i>VA</i>	<i>NC</i>	<i>SC</i>	<i>OH</i>	<i>WI</i>	TOTALS FOR REPORTED STATES	

