ANNEXURE 3

RETURN FOR PAYMENT: CIVIL AVIATION AUTHORITY FUEL LEVY

WHOLESALE DISTRIBUTOR/ AGENT / SUB-AGENT

"(A)	(B)	(C)	(D)	(E) ADJUSTMENTS			(F)	(G)
Product Local Sales	Levy No VAT c/l	Volume Litres	Amount Paid (R)	Volume Litres	Amount (R)	Month	Adjusted Volumes Litres	Payable Adjusted amount (R)
Jet A1								
Avgas								
SUB TOTAL								
Adjustments per month (L)								
Amount of payment								

Product Foreign Sales	Levy No VAT c/l	Volume Litres	Amount Paid (R)	Volume Litres	Amount (R)	Month	Adjusted Volumes Litres	Payable Adjusted amount (R)
Jet A1								
Avgas								
SUB TOTAL								
Adjustments per month (L)								
Amount of payment								

TOTAL FOR THE MONTH (LOCAL AND FOREIGN SALES)						
(A)	(B)	(C)	(D)	(E)	(F)	(G)"

"NOTE: Volumes must be adjusted for	COMPANY SIGNATURE	
own use prior to inclusion in column	CAPACITY	
(C) and in column (A)	DATE	
E-mail to: Fuellevy@caa.co.za"		