



**PETROLEUM MARKETER
MEMBERSHIP**

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A C T I V E A P P L I C A T I O N

We hereby apply for Active membership in the above Association, and agree to pay the **annual** dues based on the schedule listed on the reverse side.

PLEASE TYPE OR PRINT AND COMPLETE MEMBER INFORMATION ON REVERSE SIDE.

Company _____

Street Address _____

City _____ State _____ Zip _____

Mailing Address _____

City _____ State _____ Zip _____

County _____ Phone (____) _____ Fax (____) _____

Web Site URL _____ E-Mail Address _____

I understand that the information above will be published in the PPMCSA Directory and will, therefore, be available for use by any person who is able to obtain a copy of the Directory.

I prefer to receive electronic communications via: _____ Fax _____ E-Mail

I understand that electronic communications may contain material that could be deemed unsolicited advertising under FCC rules. In choosing either method of communication as listed above, I hereby grant to PPMCSA express permission to deliver such communications to the applicable facsimile number and/or e-mail address designated above.

GALLONAGE: (See reverse for definition)

Company Representative Name & Title
(Name to be shown in Directory)

Kerosene _____

#2 Fuel Oil _____

Diesel _____

Authorizing Signature

Gasoline _____

Amount of Check Enclosed \$ _____

PAYMENT MUST ACCOMPANY APPLICATION.

TOTAL _____

ADDITIONAL MAILINGS

The designated company representative, listed above, receives a mailing as part of the dues payment. Additional mailings to other employees of the company may be added at \$30.00 each, annually. Please list additional mailing(s) below.

Name _____ Name _____

Address _____ Address _____

City _____ State _____ Zip _____ City _____ State _____ Zip _____

Phone (____) _____ Fax (____) _____ Phone (____) _____ Fax (____) _____

E-Mail Address _____ E-Mail Address _____

Web Site URL _____ Web Site URL _____

IN ORDER FOR US TO BE ABLE TO REPRESENT THE ENTIRE PPMCSA MEMBERSHIP AND TO PROVIDE STATISTICAL INFORMATION, IT IS VERY IMPORTANT THAT YOU COMPLETE THE ACTIVE MEMBER INFORMATION (ON THE REVERSE SIDE). ALL INFORMATION ON YOUR APPLICATION IS KEPT STRICTLY CONFIDENTIAL.

FOR OFFICE USE ONLY: Company # _____ Master List _____ Web Site _____
Computer _____ Rolodex Cards _____ File Folder _____ Dir. Add. _____
Letter _____ Kit Sent _____ Date Approved _____

-OVER-

ACTIVE MEMBER INFORMATION

Residential Home Htg. Accts. _____	Employees _____	<u>BRANDS (Gasoline)</u>
Commercial Fuel Accts. _____	C-Stores _____	_____
Delivery Trucks _____	Stations Controlled _____	_____
Transports _____	Stations Supplied _____	_____
Other Vehicles _____		

ACTIVE DUES SCHEDULE

HEATING FUELS AND MOTOR FUELS
(Gallons)

1	TO	500,000	.....	\$ 331.00
500,001	TO	750,000	.....	441.00
750,001	TO	1,000,000	.....	551.00
1,000,001	TO	2,000,000	.....	689.00
2,000,001	TO	3,000,000	.....	838.00
3,000,001	TO	4,000,000	.....	998.00
4,000,001	TO	5,000,000	.....	1,169.00
5,000,001	TO	6,000,000	.....	1,350.00
6,000,001	TO	7,000,000	.....	1,544.00
7,000,001	TO	8,000,000	.....	1,747.00
8,000,001	TO	9,000,000	.....	1,962.00
9,000,001	TO	10,000,000	.....	2,188.00
10,000,001	TO	11,000,000	.....	2,426.00
11,000,001	TO	12,000,000	.....	2,590.00
12,000,001	OR ABOVE		.....	2,756.00

GALLONAGE

The above dues are based on total gallons of heating fuels (kerosene and fuel oil - distillate), and motor fuels (gasoline and diesel), except those sold under the fill to another distributor. This includes retail gallons at member-operated locations. In the case of multiple operations, membership should reflect all gallons from combined operations, unless each operation is enrolled as a member.

CONTRIBUTIONS OR GIFTS TO PPMCSA ARE NOT DEDUCTIBLE AS CHARITABLE CONTRIBUTIONS FOR FEDERAL INCOME TAX PURPOSES. HOWEVER, DUES PAYMENTS MAY BE DEDUCTIBLE BY MEMBERS AS AN ORDINARY AND NECESSARY BUSINESS EXPENSE.

PLEASE LIST THE APPROPRIATE GALLONAGE ON THE REVERSE SIDE.