



Montana Department of Transportation
 PO Box 8019
 Helena, MT 59604-8019
 (406) 444-7270

**Affidavit Form to be Used When the Original Invoice or Invoices Have Been Lost
 Both Sections A and B must be completed**

Complete the following sworn statement and attach this form to the duplicate invoices

County of _____

State of _____

A. Claimant

I hereby certify that the original copies of the attached invoices have been lost or destroyed and that no gasoline, gasohol and/or diesel refund has been received for the same. In the event that the originals are found, I will not present them to the Fiscal Operations Bureau of the Department of Transportation office for gasoline, gasohol, and/or diesel refund.

Claimant's Signature: _____

Subscribed and sworn to before me this _____ day of _____, 20____

(Seal)

 Notary Public

County of _____

State of _____

B. Dealer

Our records indicate that _____ purchased the number of gallons of gasoline, gasohol and/or diesel on the date shown on the attached duplicate invoice(s), which are exact copies of the lost original(s). The numbers and dates on the original(s) were as follows:

Number	Date

Dealer's Signature: _____

Subscribed and sworn to before me this _____ day of _____, 20____

(Seal)

 Notary Public