Apply Today for Your Share of the $80,000,000 Oil Overcharge Refund

Application for Crude Oil Refund

Read Instructions on Reverse Side

1. Applicant Name
   Street/Box Number   City   Zip Code
   Nebraska

   Social Security
   Federal I.D. Number
   Contact Name (if different than above)

   Area Code & Phone Number (   )

   Refund to: (if different than above)
   Name

   Street/Box Number   City   Zip Code
   Nebraska

2. Petroleum used from 8/19/73 to 1/27/81. Amount in Gallons
   □ Gasoline
   □ Diesel
   □ Propane
   □ Motor Oil
   □ Heating Oil
   □ Other

   How did you calculate the total gallons used?
   □ Used records. Located at:
   □ Used estimates. Explain calculations:

   TOTAL GALLONS

3. Applicant Type (check box(es))
   □ Individual
   □ Business
   □ Government
   □ School
   □ Is the business a Corporation?
   □ Yes  □ No
   □ Hospital
   □ Farm/Ranch
   □ Other (specify)

4. Explain how you use petroleum products.

5. Have you (or any parent firm, affiliate, and/or subsidiary) previously filed for a refund under the Stripper Well case?  □ Yes  □ No

6. Did you do business under more than one name?  □ Yes  □ No
   If yes, list names:


Application Deadline: December 31, 1987