

Sales and Use Tax Report

PARISH OF EAST FELICIANA
SALES AND USE TAX DEPARTMENT
P.O. BOX 397
CLINTON, LA 70722

To avoid penalties be sure that you transmit this return on or before the 20th of each month following the period covered.

Parish Tax ID Number: _____

Vendor Name: _____

Address: _____

City, State, Zip: _____

BUSINESS NUMBERS
225-683-8277 - PHONE
225-683-3320 - FAX

THIS RETURN IS DUE ON THE 1ST DAY OF THE MONTH FOLLOWING PERIOD COVERED BY THE RETURN AND BECOMES DELINQUENT ON 21ST DAY

Period Covered _____ 20_____

| | 5% Parish | DO NOT USE THESE COLUMNS | | | | | |
|--|-----------|---|--|--|----|------------------------------|----|
| | \$ | | \$ | | \$ | | \$ |
| 1. Gross sales of tangible personal property, leases, rentals, and services as reported to the State of Louisiana | | | | | | | |
| SCHEDULE "A" ALLOWABLE DEDUCTIONS | | | | | | | |
| 2. Sales for resale. | | | | | | | |
| 3. Cash discounts, sales returns & allowances. | | | | | | | |
| 4. Sales delivered or shipped outside this jurisdiction. | | | | | | | |
| 5. Sales of gasoline and motor fuels. | | | | | | | |
| 6. Sales to U.S. Gov't., State of LA & its political subdivisions and agencies. | | | | | | | |
| 7. Food paid for with USDA food stamps or WIC vouchers. | | | | | | | |
| 8. | | | | | | | |
| 9. | | | | | | | |
| 10. | | | | | | | |
| 11. Total allowable deductions (line 2 thru 10). | | | | | | | |
| COMPUTATION OF SALES AND USE TAX | | HAVE YOU USED THE PROPER COLUMN? | | | | | |
| 12. Adjusted gross sales (Line 1 minus 11). | | | | | | | |
| 13. | | | | | | | |
| 14. Purchases subject to use tax in each jurisdiction. | | | | | | | |
| 15. Total (Line 12 plus 14). | | | | | | | |
| 16. Tax (5% of Line 15). | | | | | | | |
| 16a. Total of Out of State Repairs \$ _____ x 2% | | | | | | | |
| 17. Excess tax collected. | | | | | | | |
| 18. Total (Line 16 plus line 17). | | | | | | | |
| 19. Vendor's Compensation (2% of line 18, deductible only when payment is not delinquent). | | | | | | | |
| 20. Net tax due (line 18 minus line 19). | | | | | | | |
| 21. Delinquent Penalty (5% of tax for each 30 days or fraction thereof of delinquency not to exceed 25% in the aggregate). | | | | | | | |
| 22. Interest (1 1/4% per month from due date until paid). | | | | | | | |
| 23. Total tax, penalty and interest due. | | | | | | | |
| 24. Tax debit or credit (Authorized memo must be attached). | | | | | | | |
| 25. Total amount due (Line 23 plus or minus line 24). | | | | | | | |
| 26. REMITTANCE ATTACHED (TOTALS OF ALL COLUMNS) | | | | | | | \$ |
| I declare under penalties for filing false reports that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct, and complete return. If the return is prepared by a person other than the taxpayer, his declaration is based on all the information relating to the matter required to be reported in the return of which he has any knowledge. | | | | | | La Tax Identification Number | |
| WARNING: DO NOT USE ANY OTHER TAXPAYERS RETURN AS THIS WILL RESULT IN IMPROPER CREDIT! | | | Date: _____ Authorized Signature: _____ | | | | |

MAKE YOUR REMITTANCE ON ONE CHECK PAYABLE TO EAST FELICIANA PARISH SALES TAX FUND.