

PARISH TAX ACCOUNT NO.

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

Caldwell Parish School Board
Caldwell Parish Hospital District #2
Caldwell Parish Police Jury
Town of Columbia
Village of Grayson

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

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 parish.	
5 Sales of gasoline and motor fuels.	
6 Sales to U.S. Gov't., State of LA & its political sub.& agencies	
7 Food paid for with USDA food stamps or WIC vouchers.	
OTHER DEDUCTIONS Authorized By Law. (explain briefly)	
8	
9	
10	
11 Total allowable deductions (Line 2 thru 10).	
12 Adjusted gross sales (Line 1 minus 11).	

PERIOD COVERED _____

PLEASE INDICATE ANY CHANGES BELOW

Date Out-of-Business	Date Business Sold
Name of New Owner	
Location Address Change	
Mailing Address Change	

COMPUTATION OF SALES AND USE TAX

Please use the proper column(s)

	A Parish Sales 5.00%	B Columbia Sales 5.00%	C Grayson Sales 5.00%			
13 Adjusted gross sales in each jurisdiction.						
14 Purchases subject to use tax in each jurisdiction.						
15 Total (Line 13 plus 14)						
16 Tax (Rates per above X Line 15)						
17 Excess tax collected.						
18 Total (Line 16 plus 17)						
19 Vendor's compensation (2.0% 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 30 days or fraction thereof delinquency not to exceed 25% in the aggregate.						
22 Interest (1.25% per mo. 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 (TOTAL OF ALL COLUMNS)						

I declare under the 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 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 matters required to be reported in the return of which he has any knowledge.

LOUISIANA TAX IDENTIFICATION NO:

WARNING: DO NOT USE ANY OTHER TAXPAYER'S RETURN AS THIS WILL RESULT IN IMPROPER CREDIT

DATE	AUTHORIZED SIGNATURE	REVIEWED BY

MAKE YOUR REMITTANCE ON ONE CHECK PAYABLE TO:

Caldwell Parish Sales Tax Fund
PO Box 280
Vidalia LA 71373

BUSINESS LOCATION
FOR TAXPAYER ASSISTANCE CALL:
318-336-6235
800-826-2732
318-336-1549 FAX