

**TO AVOID PENALTIES, RETURN AND
PAYMENT MUST BE TRANSMITTED
ON OR BEFORE THE 20TH DAY
FOLLOWING THE PERIOD COVERED**

Account Number _____

Business Name _____

Address _____

City, State Zip Code _____

Tired of filing your sales/use tax return by mail with a check? Use online filing with ACH Debit or ACH Credit! Visit <https://parishe-file.revenue.louisiana.gov> to sign up & get started.

Date Business Discontinued		Date Business Sold		Name of Purchaser	
Business Location Change			Mailing Address Change		Change in Name of Business
Type (Ind. Corp, LLC, LLP, etc.)	Other			Signature and Title of Preparer	

STATE TAX ID#

- PERIOD ENDING _____ 20__

Revised 10/01/2022