

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.

Tensas Parish School Board
Tensas Parish School EFI District
Tensas Parish Police Jury
Tensas Law Enforcement District
City of Newellton
Town of St Joseph
Town of Waterproof

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.

PERIOD COVERED

| | |
|--|--|
| 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 Line 10). | |
| 12 Adjusted gross sales (Line 1 minus Line 11). | |

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)

| | 5400 A Parish Sales 5.75% | 5401 B Newellton Sales 6.50% | 5402 C St Joseph Sales 6.75% | 5403 D Waterproof Sales 6.50% | | |
|--|---------------------------------------|--|--|---|--|--|
| A: Sales Outside Newellton / St Joseph / Waterproof | | | | | | |
| B: Sales Inside Newellton | | | | | | |
| C: Sales Inside St Joseph | | | | | | |
| D: Sales Inside Waterproof | | | | | | |
| 13 Adjusted gross sales in each jurisdiction. | | | | | | |
| 14 Purchases subject to use tax in each jurisdiction. | | | | | | |
| 15 Total (Line 13 plus Line 14) | | | | | | |
| 16 Tax (Rates per above X Line 15) | | | | | | |
| 16b Reduced Rate Deduction per Schedule A (Food & Drug) | | | | | | |
| 16c Net tax due (Line 16 minus Line 16b) | | | | | | |
| 17 Excess tax collected. | | | | | | |
| 18 Total (Line 16c plus Line 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 the day after due date not to exceed 25% in the aggregate. | | | | | | |
| 22 Interest (1% 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:

Tensas Parish Sales Tax Fund
PO Box 430
Vidalia LA 71373

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

Parish of Tensas

**Sales and Use Tax Report
Schedule A**

Business Name _____

Parish Tax Account Number _____

Period Covered _____

| Domicile Code | Column | Deduction Calculation | Food & Drug Sales | Total Deduction on Line 16b | | | |
|----------------------|---------------|--|--|------------------------------------|--------------|--|-------|
| 5400 | A | Sales Amount Tax Rate Deduction Amount | <table border="1"><tr><td> </td></tr><tr><td>0.50%</td></tr><tr><td> </td></tr></table> | | 0.50% | | _____ |
| | | | | | | | |
| 0.50% | | | | | | | |
| | | | | | | | |
| 5401 | B | Sales Amount Tax Rate Deduction Amount | <table border="1"><tr><td> </td></tr><tr><td>0.50%</td></tr><tr><td> </td></tr></table> | | 0.50% | | _____ |
| | | | | | | | |
| 0.50% | | | | | | | |
| | | | | | | | |
| 5402 | C | Sales Amount Tax Rate Deduction Amount | <table border="1"><tr><td> </td></tr><tr><td>0.50%</td></tr><tr><td> </td></tr></table> | | 0.50% | | _____ |
| | | | | | | | |
| 0.50% | | | | | | | |
| | | | | | | | |
| 5403 | D | Sales Amount Tax Rate Deduction Amount | <table border="1"><tr><td> </td></tr><tr><td>0.50%</td></tr><tr><td> </td></tr></table> | | 0.50% | | _____ |
| | | | | | | | |
| 0.50% | | | | | | | |
| | | | | | | | |