## IBERIA PARISH SCHOOL BOARD **SALES & USE TAX DEPARTMENT**

P.O. BOX 9770 \* NEW IBERIA, LA 70562-9770 Phone: (337) 365-2341 \* Fax: (337) 365-6584

SALES TAX INFO.: LATAONLINE.ORG

GROSS SALES OF TANGIBLE PERSONAL PROPERTY, LEASES, RENTALS     AND SERVICES AS REPORTED TO THE STATE OF LOUISIANA (BEFORE TAXES)     1.	
ALLOWABLE DEDUCTIONS	
2. SALES FOR RESALE OR FURTHER PROCESSING (CERTIFICATE ON FILE)	
3. CASH DISCOUNTS, SALES RETURNS AND ALLOWANCES	
4. SALES DELIVERED OR SHIPPED OUTSIDE THIS JURISDICTION (DOES NOT APPLY TO REPAIRS.)	
5. SALES OF GASOLINE AND MOTOR FUELS	
6. SALES TO THE US GOVT. , THE STATE OF LA, ITS POLITICAL SUBDIVISIONS AND AGENCIES	
7. PURCHASES PAID WITH FOOD STAMPS OR WIC VOUCHERS	
Other Deductions Authorized by Law (Explain Briefly)	
8.	
9.	
10.	
11. TOTAL ALLOWABLE DEDUCTIONS (LINE 2 THROUGH LINE 10) 11.	
12. ADJUSTED GROSS SALES (LINE 1 MINUS LINE 11)	

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Account #				
MONTH:	 	-		

Date Business Discontinued Date Business Sold Name of New Owner

This return is DUE on the 1st day of the month following the period covered by this return, and becomes DELINQUENT if not transmitted on or before the 20th day.

COMPUTATION OF SALES AND USE TAX	A. 5.25%	B. 4.75%	C. 5.00%	D. 4.50%	E. 4.25%	F. 5.25%	G. 5.50%	K. 6.00%	L. 6.00%	M. 5.75%
	NEW IBERIA	JEANERETTE	DELCAMBRE	LOREAUVILLE	UNINCORPORATED	EDD #1 - PARISH	NEW IBERIA ANNEX	HWY 14 - NI	HWY 182 - NI	EDD #3 - NI
13. IN EACH JURISDICTION  Total of Columns Must Equal Line 12										
14. PURCHASES SUBJECT TO USE TAX IN EACH JURSIDICTION										
15. TOTAL(LINE 13 PLUS 14)										
16. TAX DUE MULTIPLY LINE 15 BY SHOWN IN PROPER COLUMN										
17. EXCESS TAX COLLECTED										
18. TOTAL (LINE 16 PLUS LINE 17)										
21. DELINQUENT 5%OF TAX FOR EACH 30 DAYS OR FRACTION THEREOF, Delinquency not to exceed 25% in the aggregate										
22. INTEREST - 1.00% PER MONTH (.0003288 PER DAY 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. I declare under the penalties for filling 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 completed return. If the return is prepared by a person other than this 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.							•			
27. PRESCRIPTION DRUGS / MEDICAL DEVICES										
28. MANUFACTURING MACHINERY & EQUIPMENT										

Signature of Individual or Agent	Date	State Tax ID#
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