



# WEST BATON ROUGE PARISH

## REVENUE DEPARTMENT

POST OFFICE BOX 86

PORT ALLEN, LOUISIANA 70767

TELEPHONE (225) 336-2408 • FAX (225) 334-0543

Online filing available at [www.salestaxonline.com](http://www.salestaxonline.com)

### PLEASE INDICATE ANY CHANGES BELOW

<input type="checkbox"/> <b>FINAL RETURN</b>	Date Business Closed	Date Business Sold
Name of New Owner		
Mailing Address Change		
Location Address Change		

## SALES AND USE TAX REPORT

1. Gross sales of tangible personal property, leases, rentals, and services as reported to the State of Louisiana			
<b>ALLOWABLE DEDUCTIONS</b>			
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			
5. Sales of gasoline and motor fuels			
6. Sales to U.S. Government, State of Louisiana, its Political Subdivisions and Agencies			
7. Food paid for with USDA Food Stamps or WIC vouchers			
<b>OTHER DEDUCTIONS AUTHORIZED BY LAW (EXPLAIN BRIEFLY)</b>			
8.			
9.			
10.			
11. Total allowable deductions (Sum of lines 2 through 10)			
<b>COMPUTATION OF SALES AND USE TAX</b>			
12. Adjusted Gross Sales (Line 1 minus line 11)			
		Local Tax Rates	
		A 5.25%	B 5.75%
Complete only those columns in which taxable activity occurs		Parishwide	Riverview EDD
13. Adjusted Gross Sales in each jurisdiction (Total of columns must equal line 12)			
14. Purchases subject to Use Tax			
15. Total (Line 13 plus line 14)			
16. Tax Due (Multiply line 15 by % shown in proper column)			
16a. Sales of Food for Home Consumption, Prescription Drugs & Medical Devices			
16b. Sales of Food for Home Consumption, Prescription Drugs & Medical Devices 1% deduction (Multiply line 16a by 1%)		<	>
16c. Net Tax Due (Line 16 less line 16b)			
17. Excess Tax collected			
18. Total Tax Due (Line 16c plus line 17)			
19. Vendor's Compensation (1% of line 18) <span style="color: red;">(Deductible only when payment is NOT delinquent)</span>			
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% per month or fractional part thereof from date due until paid)			
23. Total Tax, Penalty, and Interest Due (Sum of lines 20 through 22)			
24. Tax debit or credit <span style="color: red;">(Authorized Memo must be attached)</span>			
25. Total Amount Due (Line 23 plus or minus line 24)			
26. Total Remitted (Total of line 25 Columns A & B)			
Make Remittance Payable to: <b>West Baton Rouge Revenue Department</b>		<b>CHECK #</b>	<b>TOTAL REMITTED</b>

This return is **DUE** on the 1st day of the month following the period covered by this return, and becomes **DELINQUENT** if not postmarked prior to the 21st day.

**WARNING: DO NOT** use any other taxpayer's return as this will result in improper credit.

I declare under the penalties for filing false report that this return (including any accompanying schedule 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 the information relating to the matters required to be reported in the return of which he has any knowledge.

Date	Authorized Signature	LA Tax ID #	WBR Tax ID #
E-Mail Address		Phone Number	