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Date	Phone			Amended	<input type="checkbox"/>
Name	BROOMFIELD HIGH BANDPARENTS ASSOCIATION		1. Gross Sales and Services (include bad debts, previously deducted) ● (1-4)	1,040.00	
Due Date	01/21/2014		2. Deductions: a. Sales to other licensed dealers, for resale ● (2-4)	0.00	00
Acct. No.	04265608-0000		20-100 b. Other deductions (itemized above).....	0.00	17
Period	12/31/2013				
	64-0001-001		c. Total (add lines 2a & 2b).....		0.00
3. Net sales: (line 1 minus line 2C).....	1,040.00	1,040.00	1,040.00	1,040.00	
a. Sales out of taxing area.....	0.00	0.00	0.00	0.00	
b. Exemptions (from schedule).....	0.00	0.00	0.00	0.00	
c. Overpayment from previous return.....	0.00	0.00	0.00	0.00	
4. Net taxable sales (line 3 minus a,b, & c)..... ● (4-1)	0.00	(4-2) 0.00	(4-3) 1,040.00	(4-4) 1,040.00	
TAXRATE	0.00000	0.00000	0.01100	0.02900	
5. Amount of sales tax.....	0.00	0.00	1.00	3.00	
6. Excess tax collected..... ● (6-1)	0.00	(6-2) 0.00	(6-3) 0.00	(6-4) 0.00	
7. Total (add lines 5 & 6).....	0.00	0.00	1.00	3.00	
8. a. Service fee rate.....	0.00000	0.03000	0.02220	0.02220	
b. Service fee allowed vendor (only if paid on or before due date)..... ● (8-1)	0.00	(8-2) 0.00	(8-3) 0.00	(8-4) 0.00	
9. Sales tax due (line 7 minus line 8B).....	0.00	0.00	1.00	2.00	
10. Tax on \$ 0.00..... ● (10-1)	0.00	(10-2) 0.00	(10-3) 0.00	(10-4) 0.00	
11. Total tax due (add lines 9 & 10)..... (100) (11-1)	0.00	(11-2) 0.00	(11-3) 1.00	(11-4) 2.00	
12. Penalty:.....				0.00	
13. Monthly interest rate (times line 11).....				0.00	
15. TOTAL AMOUNT REMITTED.....				\$ 40.00	

COUNTY / MTS CITY / LID SPECIAL DISTRICTS STATE

Deductions and Exemptions Schedule:

2B Other Deductions must be itemized in the schedule below.		KEEP THIS FOR YOUR RECORDS				
Part A — Deductions	(1) Service sales.....				0.00	
	(2) Sales to governmental agencies, religious or charitable organizations.....				0.00	
	(3) Sales of gasoline.....				0.00	
	(4) Sales of drugs by prescription and prosthetic devices.....				0.00	
	(5) Trade-ins for taxable resale.....				0.00	
	(6) Bad debts charged-off, returned goods, trade discounts and allowances where tax was paid (cash discounts are not allowed).....				0.00	
	(7) Cost of utilities, excluding tax (restaurants only, at end of year, using form DR 1465).....				0.00	
	(8) Sales of Agricultural Compounds.....				0.00	
	(9) Other (Explain).....				0.00	
Total add lines (1) through (9) (enter here and on line 2B of the return)..... Total					0.00	
Part B — Exemptions	3b. Enter total State Exemptions and applicable Local Exemption on line 3b. Net sales must be itemized below.					
	(1) Food, including food sold through vending machines.....		0.00	0.00	0.00	0.00
	(2) Machinery.....		0.00	0.00	0.00	0.00
	(3) Electricity.....		0.00	0.00	0.00	0.00
	(4) Farm Equipment.....		0.00	0.00	0.00	0.00
	(5) Pesticides.....		0.00	0.00	0.00	0.00
	(6) Sales of low-emitting vehicles, etc.....		0.00	0.00	0.00	0.00
	(7) School related sales.....		0.00	0.00	0.00	0.00
	(8) Cigarettes.....		0.00	0.00	0.00	N/A
	(9) Renewable energy components.....		0.00	0.00	0.00	0.00
	(10) Other (explain).....		0.00	0.00	0.00	0.00
(11) TOTAL (enter here and on line 3B of the return)		0.00	0.00	0.00	0.00	

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