

Sales and Use Tax Return
North Carolina Department of Revenue

Legal Name (First 24 Characters) ***** TAXPAYER WORKING COPY/DO NOT FILE ***** Period Beginning (MM-DD-YY)

A Test Company

Street Address
100 Main

Period Ending (MM-DD-YY)

Anywhere, WA 98070

City State Zip Code (5 Digit) Account ID

- 1. North Carolina Gross Receipts (Do not include tax collected) \$300.00 0.00
- 2. Sales for Resale (Do not include on Line 3 below) 0.00
- 3. Receipts Exempt From State Tax 0.00



Tax Type	Purchases for Use	Receipts	Rate	Tax
4. Gen. State Rate	0.00 +	300.00	0.00 x 4.75% =	\$14.25 0.00
5. 3% State Rate	0.00 +		0.00 x 3% =	0.00
6. Modular Homes	0.00 +		0.00 x 4.75% =	0.00
7. Mfg. Homes	0.00 +		0.00 x 4.75% =	0.00
8. 2% Food Rate	0.00 +		0.00 x 2% =	0.00
9. 2% County Rate <i>See Instructions</i>	0.00 +	200.00	0.00 x 2% =	\$4.00 0.00
10. 2.25% County Rate	0.00 +	100.00	0.00 x 2.25% =	\$2.25 0.00
11. 0.5% Transit County Rate	0.00 +	100.00	0.00 x 0.5% =	\$0.50 0.00
12. 0.25% Transit County Rate	0.00 +		0.00 x 0.25% =	\$0.00 0.00
13. Total State and County Tax (Add Tax From Lines 4 through 12)				\$21.00 0.00
14. Excess Collections				0.00
15. Total Tax (Add Lines 13 and 14)				\$21.00 0.00
16. Penalty - State and County				0.00
17. Interest - State and County				0.00
18. Less Prepayment for This Period				0.00
19. Prepayment for Next Period				0.00
20. Less any Credit (Attach Explanation)				0.00
21. Total Due (Add Lines 15 - 17 and 19, Minus Lines 18 and 20)			\$	\$21.00 0.00

Signature: _____ Date: _____

I certify that, to the best of my knowledge, this return is accurate and complete.

Title: ***** TAXPAYER WORKING COPY/DO NOT FILE ***** Phone: _____

MAIL TO: P.O. Box 25000, Raleigh, NC 27640-0700