

COMBINED SALES AND USE TAX

Mail to: Walker River Paiute Tribe

Tax Department

P.O. Box 411

Schurz, NV 89427

THIS RETURN IS DUE ON OR BEFORE _____
OR A PENALTY OF 10% AND INTEREST OF
1% PER MONTH WILL BE ASSESSED

IF THE NAME OR ADDRESS AS SHOWN IS INCORRECT,
OR IF THE OWNERSHIP OR BUSINESS LOCATION HAS
CHANGED, OR IF YOU ARE NO LONGER IN BUSINESS,
NOTIFY THE WALKER RIVER TAX DEPT. IMMEDIATELY.

Name & Address

Account Number _____
For Period Ending _____

This return is due on _____
or before _____

Columns A or B x C = D

	A Sales Tax	B Use Tax	C Tax Rate	D Calculated Tax
Gross Sales				
Non-Taxable Sales				
Taxable Sales =				

I hereby certify 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 complete return.
WRPT REQUIRES RETURN MUST BE SIGNED

- _____ 1. Total Cal. Tax (Column D)
- _____ 2. Collect. Allow. (1.5 % x lin 1)
Does Not Apply to Contractor
- _____ 3. New Taxes (Line 1 minus line 2)
- _____ 4. Plus debits from prior periods
- _____ 5. Less credits from prior periods
- _____ 6. Total Taxes due and payable
- _____ 7. Total amount remitted with return

SIGNATURE OF TAXPAYER OR AUTHORIZED AGENCY

TITLE

PHONE NUMBER (WITH AREA CODE)

FEDERAL TAX IDENT. NO.

DATE