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PA DEPARTMENT OF REVENUE

<b>1</b>	Total Gross Sales, Rentals, Services	
<b>2</b>	Net Taxable Sales	
<b>3</b>	Sales Tax Due	
<b>4</b>	Discount (1%)	
<b>5</b>	Net Sales Tax Due (Line 3 – Line 4)	
<b>6</b>	Use Tax Due	
<b>7</b>	Total Tax Due (Line 5 + Line 6)	
<b>8</b>	Credit	<div>TPPR <input type="checkbox"/></div> <div>OTHER <input type="checkbox"/></div>
<b>9</b>	Amount Due (Line 7 – Line 8)	

PLACE AN "X" IN THE BOX IF  
THIS IS AN AMENDED RETURN

PLACE AN "X" IN THE BOX IF  
PAYMENT IS MADE BY EFT

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TOTAL PAYMENT \$

\$

I certify that this return is to the best of my knowledge, information, and belief, a full, true and correct disclosure of all tax collected or incurred during the period indicated on this return.

**00002**

DATE \_\_\_\_\_

DAYTIME TELEPHONE NUMBER

( )

**TITLE**

**SIGNATURE**