CITY OF CENTENNIAL SALES TAX RETURN												A RETURN IS REQUIRED EVEN IF NO TAX IS DUE			
Taxpayer Name:										Filing Period:					
Location Address:										Due Date: (20th of the month following the end of the reporting period)					
City, State, Zip										Centennial License No:					
GROSS SALES AND SERVICE (Total receipts from City activity reported and accounted for in every return including sales, rental leases and all services both taxable and non-taxable)															
		A ADD: BAD DEBTS COLLECTED					(6. ADD: EXCESS TAX COLLECTED							
2.	В.	B. TOTAL (Add Lines 1 and 2A)						7. TOTAL TAX DUE (Add Lines 5 and 6)							
3.	A.	NON-TAXABLE SERVICE SALES						<i>'</i> .	TOTAL TAX DUE (Add Lines 5 and 6)						
	В.		OTHER LICENSED FOR RESALE					_	LATE FILING -	(a) PENALTY = GREATER OF \$15 OR 15% ON TAX DUE (Line 7)					
	c.	SALES SH	IPPED OUT OF CENTENNIAL				{	8.	DUE DATE ADD: (b) INTEREDUE (Line 7		T = 1.5% PER MONTH ON TAX (1.5%)				
	D.	BAD DEBT	TS CHARGED OFF					9.	TOTAL TAX, PEN		TY, AND INTEREST DUE				
·s	E.	TRADE-INS FOR TAXABLE RESALE					1	10.	A. ADD: (PRIOR PERIOD ADJUSTMENT)						
TION	F.	SALES OF GASOLINE AND CIGARETTES							B. DEDUCT: (PRIOR PERIOD ADJUSTMENT)						
DEDUCTIONS	G.	SALES TO CHARITAE	GOV'T, RELIGIOUS, AND BLE ORG.							If this amount is \$10 or less, you may the amount due and carry the amoun for payment on a future return when the threshold of \$10 has been reached.		record			
	Н.	RETURNE	D GOODS				1	11.	TOTAL DUE AND PAYABLE			forward			
	l.		PTION DRUGS / TIC DEVICES												
	J.	FOOD							MAKE	KE CHECK OR MONEY ORDER PAYABLE TO:					
	K.	OTHER DE	OTHER DEDUCTIONS (LIST)					CITY OF CENTENNIAL							
	L.						3% VENDOR ALLOWANCE - <u>ONLINE FILED ONLY</u> IF PAID BY DUE DATE								
M. TOTAL DEDUCTIONS (Total of Lines 3A through 3L) 4. NET TAXABLE SALES & SERVICE (Subtract line 3M from 2B)								Maximum Allowance = \$200.00 Minimum Allowance = \$3.00							
			- SPECIAL MESSAGE TO /		CITY										
30	HIL	DOLL A	1- 3F LCIAL WILSSAGE TO 7	T KOW THE	- 0111										
			SCHEDULE B		SCHEDULE C-CONSOLIDATED ACCOUNTS										
DO NOT COMPLETE THIS SECTION - NOT CURRENTLY IN USE BY THE CITY OF CENTENNIAL					It must b	This schedule is required in all cases in which the taxpayer makes a consolidated return which includes sales made at more than one location. It must be completely filled out and convey all information required in accordance with the column headings. If additional space is needed attach schedule in same format. Attach a supporting schedule that details lines 1, 2, 3, and 4 on Schedule A for each location.									
					CENTENNIAL BUSINESS LOCATION ADDR					ESS	PERIOD'S TOTAL (SALES	GROSS	PERIOD'S TAXABLE S		
NOT APPLICABLE															
- -					\vdash						<u> </u>				
					\vdash										
						ENTER TOTAL HERE AND IN LINES 1 AND 4 AI				OVE	LINE 1		LINE 4		
NEW BUSINESS DATE:					CHANGE OF LOCATION ADDRESS					CHANGE OF	MAILING A	ADDRESS			
MONTH		ONTH	DAY	YEAR	Address				Address 1:						
					Address	Address 2:				Address 2:					
		DISCONTINUED DATE:			City/State	City/State/Zip:				City/State/Zip:					
MONTH			DAY	YEAR	Phone:					Phone:					
_		DV 0555	EVINDED DENN TV 05 252 ""	V TUAT TO:	Contact Person:					Contact Person:					
			FY UNDER PENALTY OF PERJUR	Y, THAT THE	STATEME	ENTS MADÉ HEI	KEIN ARE	:, Τ(O THE BEST OF M	Y KNOWLE[CORRE	CI.		
Ĭ	natu	re: Name:			Title: Phone: Email:										
L (1)	iteu	ivaille.	PLEASE REMIT TO: CI	TV OF CEN	!	AI DEMITTA	NCE CE			17383 DE	I.	217_02			
			FOR QUESTIONS												