PERIOD
FROM

TO

DUE
DATE

ACCOUNT
NUMBER

CITY OF LA JUNTA

P.O. BOX 489 • 601 COLORADO • LA JUNTA, CO 81050 • (719) 384-5991

1.	GROSS SALES AND SERVICE (TOTAL RECEIPTS FROM CITY ACTIVITY MUST BE REPORTED AND ACCOUNTED FOR IN EVERY RETURN (EG: ALL SALES RENTALS AND LEASES AND ALL SERVICES BOTH TAXABLE AND NON-TAXABLE)		
2A.	ADD: BAD DEBTS COLLECTED		
2B.	TOTAL LINES 1 & 2 A		
3. DEDUCTIONS	A. NON-TAXABLE SERVICE SALES (INCLUDED IN ITEM 1 ABOVE)		
	B. SALES TO OTHER LICENSED DEALERS FOR PURPOSES OF TAXABLE RESALE		
	C. SALES SHIPPED OUT OF CITY AND OR STATE (INCLUDED IN ITEM 1 ABOVE)		
	D. BAD DEBTS CHARGED OFF (ON WHICH CITY SALES TAX HAS BEEN PAID)		
	E. TRADE-INS FOR TAXABLE RESALE		
	F. SALES OF GASOLINE AND CIGARETTES		
	G. SALES TO GOVERNMENTAL, RELIGIOUS AND CHARITABLE ORGANIZATIONS		
	H. RETURNED GOODS		
	I. PRESCRIPTION DRUGS / PROSTHETIC DEVICES		
	J. OTHER DEDUCTIONS (LIST)		
	K.		
	L.		
	M.		
	3. TOTAL DEDUCTIONS (TOTAL OF LINES 3 A THRU M)		
4.	TOTAL CITY NET TAXABLE SALES & SERVICE (LINE 2B MINUS TOTAL LINE 3)		

TAXPAYER'S COPY

PLEASE COMPLETE THIS FORM ON REVERSE SIDE

SALES/USE TAX RETURN

COMPUTATION OF TAX

5.	AMOUNT OF CITY SALES TAX: % OF LINE 4		
6.	ADD: EXCESS TAX COLLECTED:		
7.	ADJUSTED CITY TAX: (ADD LINES 5 and 6)		
8.	DEDUCT % OF LINE 7 (VENDORS FEE, IF PAID BY DUE DATE)		
9.	TOTAL SALES TAX (ITEM 7 MINUS 8)		
10.	(FROM SCHEDULE B) CITY USE TAX - AMOUNT SUBJECT TO TAX X % =		
11.	LODGING TAX: AMOUNT SUBJECT TO TAX X % =		
12.	TOTAL TAX DUE (ADD LINES 9, 10 and 11)		
13.	LATE FILING (IF RETURN IS FILED AFTER DUE DATE THEN) ADD: PENALTY: / INTEREST PER MONTH — ENTER TOTAL		
14.	TOTAL TAX: PENALTY AND INTEREST DUE: (ADD LINES 12 and 13)		
15.	ADJUSTMENT PRIOR PERIODS FOR CITY USE ONLY: A - ADD / B - DEDUCT		
16.	TOTAL DUE AND PAYABLE: (MAKE CHECK OR MONEY ORDER PAYABLE TO CITY OF LA JUNTA)		

SCHEDULE - A: SPECIAL MESSAGE TO AND FROM CITY/TAXPAYER

BE SURE TO REVERSE CARBON BEFORE FILLING OUT THESE SCHEDULES

SCHEDULE - B - CITY USE TAX

The Use Tax Ordinance imposes a tax upon the privilege of using, storing, distributing or otherwise consuming tangible personal property purchased, rented or leased.

DATE OF PURCHASE	NAME OF VENDOR ADDRESS	TYPE OF COMMODITY PURCHASED	PURCHASE PRICE
(A) LIST OF PURCHASES (IF ADDITIONAL SPACE NEEDED - ATTACH SCHEDULE IN SAME FORMAT)			
			$
(B) TOTAL PURCHASE PRICE OF PROPERTY SUBJECT TO CITY USE TAX			$
ENTER TOTAL LINE (B) ON LINE 10 ON FRONT OF RETURN			

SCHEDULE - C - CONSOLIDATED ACCOUNTS REPORT

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.

ACCOUNT NUMBERS	BUSINESS ADDRESSES OF CONSOLIDATED ACCOUNTS	PERIODS TOTAL GROSS SALES (AGGREGATE TO LINE 1 FRONT OF RETURN)	PERIODS NET TAXABLE SALES (AGGREGATE TO LINE 4 FRONT OF RETURN)
		$	$
	ENTER TOTALS HERE AND ON FRONT OF RETURN	$	$

NEW BUSINESS DATE
MO. | DAY | YR.

DISCONTINUED DATE
MO. | DAY | YR.

1. If ownership has changed give date of change and new owner's name
2. If business has been permanently discontinued give date discontinued
3. If business location has changed give new address
4. Records are kept at what address? _____
5. If business is temporarily closed give dates to be closed
6. If business is seasonal, give months of operation
7. If this return includes sales for more than one location, refer to and complete schedule "C"

SHOW BELOW CHANGE OF OWNERSHIP, NAME AND/OR ADDRESS ETC.

☐ BUS ADDRESS ☐ MAILING ADDRESS

I hereby certify, under penalty of perjury, that the statements made herein are to the best of my knowledge true and correct.

BY _____

COMPANY _____

PHONE _____

TITLE DATE