

MONTHLY SALES REVENUE RETURN

Taxation and Revenue Department

TAXPAYER / BUSINESS NAME _____

REPORTING PERIOD (MONTH / YEAR) _____

TAX IDENTIFICATION NUMBER (TIN) _____

DATE OF FILING _____

1. SUMMARY OF SALES REVENUE

REVENUE CLASSIFICATION	AMOUNT
Gross Sales (Taxable)	
Gross Sales (Exempt)	
Export Sales	
Total Gross Sales (A)	
Less: Sales Returns & Allowances	
Less: Sales Discounts	
Total Deductions (B)	
Net Taxable Sales Revenue (A - B)	

2. PRODUCT / SERVICE BREAKDOWN (TOP CONTRIBUTING CATEGORIES)

CATEGORY / PRODUCT LINE	QUANTITY SOLD	AVERAGE UNIT PRICE	TOTAL REVENUE
Total Breakdown Revenue			

3. SALES TAX CALCULATION

TAX CATEGORY	TAX RATE (%)	TAX DUE
Standard Rate Sales Tax		

TAX CATEGORY	TAX RATE (%)	TAX DUE
Reduced Rate Sales Tax		
Total Sales Tax Due		

Declaration: I hereby declare, under penalty of perjury, 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 made in good faith, for the taxable period stated.

AUTHORIZED REPRESENTATIVE SIGNATURE

DATE