

<p>CITY OF SANDPOINT ATTN: TAX DEPT 1123 LAKE STREET SANDPOINT, ID 83864</p> <p>LOCAL OPTION TAX RETURN</p> <p>PERMIT NO: _____</p> <p>Reporting Period from: _____ to: _____</p> <p>Business Name: _____</p> <p>Attach a copy of Idaho Sales Tax Return for the Reporting Period.</p> <p>Tax payment due on or before the 20th of the following month. This return must be filed even though no tax may be due.</p> <p>Return check Charge \$ 20.00</p>	Total Sales	
	Less Non Taxable sales	
	Taxable Sales (total sales less non taxable sales)	
	Total Tax (1% of taxable sales)	
	Add after Due Date: Penalty – the greater of 5% of Tax Due or \$10, plus 1% interest per month on Tax Due	
	Total Tax Due This Period	
	I do hereby swear or affirm that the above information is true and correct to the best of my knowledge.	
	Signature _____ Date _____	
RETAIN PINK COPY FOR YOUR RECORDS AND MAIL WHITE AND YELLOW COPIES WITH REMITTANCE		

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