



 Name

 Address

 City State Zip

Account #: _____

WV/SDR-2015
 rTL186 v.4

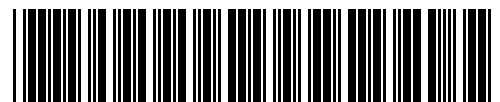
SOFT DRINK MONTHLY REPORT

All Lines Must Be Completed

Period Ending:	Due Date:	FINAL <input type="checkbox"/>	AMENDED <input type="checkbox"/>	
TAX CALCULATION				
	Column A Syrups and Prepared Drinks	Column B Powders	Column C Prepared Drinks (Bottlers Only)	Column D Total (A + B + C = D)
1. Gross Tax Due	.	.	.	.
2. Less Exports Tax Not Paid	.	.	.	.
3. Balance of Gross Tax Due (Line 1 minus Line 2)	.	.	.	.
4. Credits (Line F - Prepayment of Stamps and/or Crowns from WV/SDR-2015 SUP)				.
5. Discount (Line 3 Column C multiplied by 0.1250) BONDED BOTTLERS ACCOUNTS ONLY				.
6. Net Tax Due (Line 3 minus Line 4 and Line 5)				.
7. Tax Paid Out-of-State Shipments (Exports)				.
8. Total Tax Due (Line 6 minus Line 7 - If less than zero, enter zero)				.
9. REQUEST FOR REFUND (Line 7 minus Line 6 - If less than zero, enter zero)				.

Sign Your Return			
Under penalties of perjury, I declare that I have examined this return (including accompanying schedules and statements) and to the best of my knowledge and belief it is true and complete.			
(Signature of Taxpayer)	(Name of Taxpayer - Type or Print)	(Title)	(Date)
(Person to Contact Concerning this Return)	(Telephone Number)	(E-mail Address)	
(Signature of preparer other than taxpayer)	(Address)	(Date)	

MAIL TO: WEST VIRGINIA STATE TAX DEPARTMENT
 Tax Account Administration Div
 P.O. Box 2991, Charleston, WV 25330-2991
FOR ASSISTANCE CALL (304) 558-3333 TOLL FREE (800) 982-8297
 For more information visit our web site at: www.tax.wv.gov
 File online at <https://mytaxes.wvtax.gov>



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