

**SELLERS USE TAX  
MONTHLY TAX RETURN**

# 13

www.cityofmobile.org/revenue

MONTH COVERED BY THIS REPORT
PERIOD COVERED BY THIS REPORT
From: _____ To: _____

OR

CITY OF MOBILE • DEPARTMENT 1519 • P.O. BOX 11407 • BIRMINGHAM, AL 35246-1519 • 251-208-7462

**FIGURES MAY BE ROUNDED TO NEAREST DOLLAR**

Is this a final return  Yes  No. If yes, attach explanation and date closed \_\_\_\_/\_\_\_\_/\_\_\_\_

	TAX DUE AT CITY RATE		TAX DUE AT P/J RATE	
	Col. A - 5%	Col. B - 2.25%	Col. C - 2.5%	Col. D - 1.125%
<b>1. Gross Receipts/Use Tax</b>				
(A) Total sales of new and used vehicles, semi-trailers and truck trailers delivered into Mobile, AL.				
(B) Total sales of machines and replacement parts used in manufacturing process delivered into Mobile, AL.				
(C) Total sales from places of amusement.				
(D) Fair market value of properly purchased at wholesale withdrawn for use or otherwise disposed of.				
(E) Retail selling price of property used within the City or PJ on which Mobile tax has not been paid.				
(F) Total sales of liquid fuel, gaseous fuel and/or any other fuel for use both on and off highways.				
(G) Total sales of beer, liquor, wine and/or other alcoholic beverages.				
(H) Total sales of <b>all</b> business delivered into Mobile, AL not included above.				
(I) Collections made during month on credit sales heretofore claimed as deductions on sale of receivables.				
<b>2. TOTAL OF EACH COLUMN (Lines A,B,C,D,E,F,G,H &amp; I above)</b>				
LESS: TOTAL DEDUCTIONS-LINE 4 ON REVERSE SIDE				
<b>5. TOTAL OF AMOUNTS REMAINING AS MEASURE OF TAX each column, line 2 minus line 4 from Reverse Side</b>				
<b>6. AMOUNT OF TAX Each column (Line 5 x Applicable rate shown at top of column).</b>				
7. Number of new vehicles withdrawn				
_____ x \$5.00 (Col.B) CITY				
_____ x \$2.50 (Col.D) PJ				
8. AMOUNT OF TAX - Each Col.				
9. Add _____% Penalty				
10. TOTAL EACH COL.	\$	\$	\$	\$

**TOTAL PAYMENT ENCLOSED WITH THIS REPORT**

\$	
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IF BUSINESS NAME IS IMPRINTED, THIS RETURN MAY BE USED ONLY BY THE BUSINESS NAMED.

Date \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_

This report, including accompanying schedules or statements, has been examined by me and is to the best of my knowledge and belief, a true and complete report made in good faith for the period stated.

4. TOTALS OF DEDUCTIONS - total of each column and enter on front

	Col. A	Col. B	Col. C	Col. D
\$				