City of Monongahela

Pennsylvania

Make Checks Payable To:
City of Monongahela

449 West Main Street
Monongahela, Pa 15063

Phone: 724.258.9024
Hours:
Monday - Friday
9:00am - 12:00pm
1:00pm - 4:00pm

Office of City Treasurer

MERCANTILE TAX RETURN FOR THE YEAR 2013

Nature of Business: _____ **Date:** _____

Business Name: _____

Business Address: _____

_____ **Phone No:** _____

RETAIL VENDOR

1. **TOTAL GROSS VOLUME FOR 2012** 0.00
2. **GROSS TAX DUE (line 1 x .00075)** _____
3. **TOTAL DUE (the larger of $20.00 or line 2)** _____
4. **IF PAID AFTER JUNE 30, Enter the amount from line 3** _____
5. **PENALTY (line 4 x .05)** _____
6. **ENTER NUMBER OF MONTHS PAST DUE** _____
7. **INTEREST (line 4 x .01 x line 6)** _____
8. **TOTAL RETAIL DUE (line 3 or after due date, line 4+line 5+line 7)** _____

WHOLESALE

1. **TOTAL GROSS VOLUME FOR 2012** 0.00
2. **GROSS TAX DUE (line 1 x .0005)** _____
3. **TOTAL DUE (the larger of $30.00 or line 2)** _____
4. **IF PAID AFTER JUNE 30, Enter the amount from line 3** _____
5. **PENALTY (line 4 x .05)** _____
6. **ENTER NUMBER OF MONTHS PAST DUE** _____
7. **INTEREST (line 4 x .01 x line 6)** _____
8. **TOTAL WHOLESALE DUE (line 3 or after due date, line 4+line 5+line 7)** _____

I declare under the penalties of perjury that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.

_____

Signature **Date**