



SALES TAX RETURN

TIN/SSN : _____

Check box if AMENDED and enter correct Reporting Period : _____
Reporting Period being "amended"

Taxpayer Name _____ Mailing Address Check here if mailing address has changed _____

Table with 7 columns: Line, Business Description, Bus. Class, Chpt. Code, Column 1 (Gross Receipts), Column 2 (Tax Rate), Column 3 (Tax Amount). Rows 1-8 for business entries, 9 for subtotal, 10-12 for adjustments, 13 for total tax due.

For payments under \$10,000 make check payable to the order of & mail to: Office of the Navajo Tax Commission... Payments over \$10,000 must be wire transferred to the following account: The Navajo Nation Tax Depository Account #: 2755351877...

ONTC ACCOUNTING USE ONLY

I declare that the information contained in this document and any attachments thereto is true and correct to the best of my knowledge and belief pursuant to all Navajo Nation laws and regulations.

Taxpayer or Duly Authorized Agent Signature _____ Print or Type Name _____ Telephone Number _____ Date _____

A signature is required to make this return valid. This return must be filed even if you have no taxes to report.

ONTC ACCOUNTING USE ONLY