

ATTACHMENT A



Finance Department
Revenue Management

Telephone Line Tax Return

Service Supplier:	Period/Month
Address:	
City, State, Zip:	

Basis of Remittance: Gross Taxes Collected Gross Taxes Charged
(the basis of remittance must remain the same for at least 12 months)

1.	TOTAL NUMBER OF ACCESS LINES	
2.	Number of Exempt Access Lines per San Jose Municipal Code (SJMC) 4.52.220	
3.	Total Access Lines subject to fee (subtract line 2 from line 1)	
4.	Access Line tax rate	\$1.57
5.	TOTAL AMOUNT DUE FOR ACCESS LINES (Multiply line 3 by line 4)	\$

6.	TOTAL NUMBER OF TRUNK LINE COUNT	
7.	Number of Exempt Trunk Lines per SJMC 4.52.220	
8.	Total Trunk Lines subject to tax (subtract line 7 from line 6)	
9.	Trunk Line tax rate	\$11.82
10.	TOTAL AMOUNT DUE FOR TRUNK LINES (Multiply line 8 by line 9)	\$

11.	TOTAL DUE (Add lines 5 and 10)	\$
12.	Adjustments*	\$
13.	10% 1 st Penalty, if not postmarked by the last day of the month the remittance is due	\$
14.	Interest – If taxes due are remitted within 30 days from due date (# of days past due X 0.0004931507X [sum of line 11 + line 14])	\$
15.	10% 2 nd Penalty, if remitted more than 30 days after due date	\$
16.	Interest – If taxes due are remitted more than 30 days after due date (# of days past 30 due X 0.0004931507 X [sum of line 11 + line 14 + line 16])	\$

17.	TOTAL TAX DUE (add lines 11 thru 17)	\$
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I declare under penalty of perjury that, to the best of my knowledge and belief, the statements herein and on attachments are true, correct, and complete.

Name	Telephone #	Title	Date
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*Itemize and Explain on Attachment (line 12)