

2020 Borough of Canonsburg

Mercantile Tax Form

Company Name and Address

Please make checks payable to:

Canonsburg Borough
68 East Pike Street Ste 101
Canonsburg, PA 15317

Office Hours: Monday - Friday 9am – 4pm

Phone: 724-745-5310

In case we should have questions about this return please provide a contact name and phone number:

Name: _____

Telephone: _____

3rd QUARTER 2020 (JUL-AUG-SEP) DUE – NOVEMBER 15, 2020

Please complete each section and total at the end.

| Section 1: MERCANTILE TAX DUE | TAXABLE GROSS VOLUME AFTER EXCLUSIONS* (Carried from line 9) | TAX RATE | TOTAL AMOUNT OF TAX DUE |
|---|--|----------|----------------------------|
| Retail and Wholesale Volume for 3rd Quarter 2020 → | | X | .001 |
| Penalties & Interest | 1.5% per month of delinquency beginning November 16, 2020 | | |
| Total Amount Due → | | | |

*See below for computation of exclusions

COMPUTATION OF GROSS VOLUME

| | | |
|-------------------|--|----------|
| Line 1 | Total Gross Volume for 3rd Quarter 2020: | \$ _____ |
| <i>EXCLUSIONS</i> | | |
| Line 2 | Federal Admission Tax paid | \$ _____ |
| Line 3 | Federal Retailer's Excise Tax paid | \$ _____ |
| Line 4 | Alcoholic Beverage Sales | \$ _____ |
| Line 5 | Pennsylvania Liquid Fuels Tax paid | \$ _____ |
| Line 6 | Non-Merchandise Sales | \$ _____ |
| Line 7 | Cigarette Tax and Light Bulb Taxes paid | \$ _____ |
| Line 8 | Total Exclusions | \$ _____ |
| Line 9 | Taxable Gross Volume (Subtract Line 8 from Line 1) Carry this amount to section 1 | \$ _____ |

I declare the information given here to be true and correct to the best of my knowledge.

Signature: _____ Title: _____ Date: _____