

NAME
ADDRESS
CITY, STATE & ZIP CODE

# PWTM

I HEREBY CERTIFY THAT THIS RETURN, TO THE BEST OF MY KNOWLEDGE AND BELIEF, IS A TRUE, CORRECT AND COMPLETE RETURN.  
SIGNATURE OF OWNER, PARTNER OR AUTHORIZED AGENT

FORM PWTM REV D 04/2016	TITLE	DATE
FEDERAL IDENTIFICATION NUMBER	RETURN FOR MONTH ENDING	

1. TOTAL AMOUNT OF PREPAID WIRELESS TELECOMMUNICATIONS RETAIL SALES TRANSACTIONS SUBJECT TO THE 2.5% CHARGE

\_\_\_\_\_ . \_\_\_\_\_

2. 2.5% CHARGE - MULTIPLY LINE 1 BY 2.5% (0.025)

\_\_\_\_\_ . \_\_\_\_\_

3. 1% ADMINISTRATIVE DEDUCTION - MULTIPLY LINE 2 BY 1% (0.01)

\_\_\_\_\_ . \_\_\_\_\_

4. TAX AMOUNT DUE AND PAID \$  
(LINE 2 MINUS LINE 3)

\_\_\_\_\_ . \_\_\_\_\_