

BOSSIER CITY — PARISH



Sales and Use Tax Division

P.O. BOX 71313
BOSSIER CITY, LOUISIANA 71171-1313
PHONE NO: (318) 741-8549
FAX NO: (318) 741-8997



CLAIM FOR REFUND OR CREDIT

State of Louisiana
Parish of Bossier
Bossier City-Parish Sales & Use Tax Division

This form to be completed by
the applicant and filed with the
Bossier City-Parish Sales & Use Tax Division

Taxpayer Account #: _____

Name of Taxpayer: _____
If taxpayer is a corporation, enter corporation name

Represented By: _____
Give name and title

Mailing Address: _____

The above representative says that the following statement is true and correct, that he or she is entitled to the refund requested and that he or she is not delinquent with the Bossier City-Parish Sales & Use Tax Division in the payment of any taxes.

Nature of Tax: _____
Sales or Use

Period: _____
Note: Submit copies of returns and/or credit memos associated with refund period(s).

Total Amount of Taxes Paid: \$ _____

Corrected Amount of Taxes That Were Due: \$ _____

Amount Requested to be Refunded: \$ _____

This refund is claimed for the following reasons: _____

Signature of Taxpayer

Date

FOR OFFICE USE ONLY

Date Request Received: _____

Assigned Auditor: _____

Total Amount Requested for Refund:
\$ _____

Amount Approved for Payment:
\$ _____

Reviewed by:

Approved by:

Date: _____