



**Revenue Division** 

2350 Albert Street Regina SK S4P 4A6

## Casual Return - 31D T

## **Provincial Sales Tax Act**

Name of Taymayan			_		Data of Paymo	nt
Name of Taxpayer			Office	Use Only	Date of Payme	
			12345	674		
Number, Street/Box Number			9324		Receipt Nun	nber
City/Town	Province Po	ostal Code				, , ,
Return Period		to D D M	M Y Y			
Type of Sales/Purchases			199	Office Use Only		
Details————				Office Use		
Details————————————————————————————————————				1. Total Sales	\$	, ¢
				2. Tax Collected		
<u> </u>				3. Tax on Purchases		
				4. Tax Payable		.
				5. Deduct tax paid at source on direct		
I certify that the information contained herein is to the best of my knowledge true and complete as stated.				6. Net Amount Payable 224		
				7. Remittance Enclosed 231		
				Make cheque or mor to Minister of Finance	ney order paya e	ble
				-	_	
Date	Taxpayer's Signatu	re	_	Phone Number		