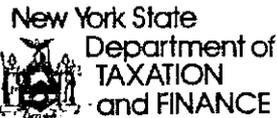


(4/85)

Sales and Use Tax Return



1185

PART - QUARTERLY
April 1, 1985 - April 30, 1985

M

Use labeled form and return envelope for filing your return

If incorrect on label, please enter correct information below. Check box to indicate whether address change is for:

- actual business address
- mailing address only

ID Number _____

Name _____

Number and Street _____

City _____

State _____ ZIP _____

PLEASE KEEP THIS COPY FOR YOUR RECORDS

Type of business _____

If you are reporting sales tax on this return for more than one business location, check here.

Summary of Tax Due - Complete "Long" or "Short" section below, not both. (See instructions)

LONG	Summary of Business Activities	A Gross sales and services (to nearest dollar)	B Taxable sales and services (to nearest dollar)	C Purchases subject to use tax (to nearest dollar)
	1. Sales and use taxes (see instructions)			\$
	2a. Credits not identified (attachments required) (see instructions)			\$
	b. Prepayments (attach ST-330's)			\$
	c. Total of lines 2a and 2b			\$
	3. Sales and use taxes due (line 1 minus line 2c)			\$
4. Add late filing charge (Penalty - 5% for first month plus 1% per month thereafter; maximum 25% Interest - Rate pursuant to Part 603 of the Tax Regulations.)			\$	
5. Amount due including late filing charge (line 3 plus line 4)			\$	

PAY THIS AMOUNT

SHORT	1a. Comparable quarter - prior year (see instructions) *	\$	
	b. Tax due (1/3 of line 1a)		
	2a. Credits (attachments required)	\$	
	b. Prepayments (attach ST-330's)	\$	
	c. Total of lines 2a and 2b		\$
	3. Sales and use taxes due (line 1b minus line 2c)		
4. Add late filing charge (Penalty - 5% for first month plus 1% per month thereafter; maximum 25% Interest - Rate pursuant to Part 603 of the Tax Regulations.)			
5. Amount due including late filing charge (line 3 plus line 4)			

PAY THIS AMOUNT

- Attach check or money order payable to "New York State Sales Tax."
- Mail in the enclosed envelope to the applicable P.O. Box on or before:

For Office Use Only

May 20, 1985

*Adjustments: Include on line 1a, "SHORT"
Locality \$ Adjustment

Signature of vendor	Telephone number
Title	Date
Signature of preparer (if other than vendor)	Telephone number
Preparer's address	Date

**IF YOUR PLACE OF BUSINESS IS
LOCATED IN THE COUNTY OF:**

MAIL RETURN TO:

ALBANY
BROOME
CHEMUNG
CHENANGO
CLINTON
COLUMBIA
DELAWARE
DUTCHESS
ESSEX
FRANKLIN
FULTON
GREENE
HAMILTON
HERKIMER
JEFFERSON
LEWIS

MONTGOMERY
ONEIDA
OTSEGO
RENSSELAER
SARATOGA
SCHENECTADY
SCHOHARIE
SCHUYLER
STEUBEN
ST. LAWRENCE
TIOGA
TOMPKINS
ULSTER
WARREN
WASHINGTON

P.O. Box 688
Albany, N.Y. 12201

BRONX
ORANGE
PUTNAM

ROCKLAND
SULLIVAN
WESTCHESTER

P.O. Box 3000
White Plains, N.Y. 10602

NEW YORK COUNTY with ZIP CODES 10001- 10019
RICHMOND

P.O. Box 2058
Church Street Station
New York, N.Y. 10008

KINGS
NEW YORK COUNTY with ZIP CODES 10020-10040
QUEENS

G.P.O. Box 5464
New York, N.Y. 10087

ALLEGANY
CATTARAUGUS
CHAUTAUQUA
ERIE

GENESEE
NIAGARA
WYOMING

P.O. Box 194
Buffalo, N.Y. 14240

NASSAU
SUFFOLK

P.O. Box 1866
Hicksville, N.Y. 11802

LIVINGSTON
MONROE
ONTARIO

ORLEANS
WAYNE
YATES

* P.O. Box 4777
Syracuse, N.Y. 13221

CAYUGA
CORTLAND
MADISON

ONONDAGA
OSWEGO
SENECA

* Please note new address

ALL VENDORS who are located out-of-state must mail their returns to:

P.O. Box 688
Albany, N.Y. 12201

PHONE

For forms or publications

from within New York State, call toll-free 1 + 800 + 462-8100
from outside New York State, call 1 + 518 + 438-1073

For information

from within New York State, call toll-free 1 + 800 + 342-3536
from outside New York State call 1 + 518 + 438-8581

WRITE

If you need to write, address your letter to:

New York State Tax Department
Taxpayer Assistance Bureau
State Campus
Albany, New York 12227