



ACCESS LINE TAX STATEMENT

Business Tax Section P.O. BOX 7425 San Francisco, CA 94120-7425 Telephone: 311 (within San Francisco only) or 415-701-2311 www.sftreasurer.org

CITY & COUNTY OF SAN FRANCISCO – OFFICE OF THE TREASURER & TAX COLLECTOR JOSÉ CISNEROS, TREASURER DAVID AUGUSTINE, TAX COLLECTOR

BUSINESS ACCOUNT NUMBER	PERIOD COVERED	DUE ON OR BEFORE								

1.	1. Total Charges for Prepaid Mobile Telephony Services											,				,						
2.	Exempt or Non-Taxable Charges \$,			,				,							
3.	Taxable Charges for Prepaid Mobile Telephony Services (Line 1 minus Line 2)							,			,				,							
4.	Access Line Tax Due for Prepaid Mobile Telephony Services (Multiply Line 3 by .076) \$						$\left[\right]$,			,				,							
	· · · · ·			For Other Than Prepaid Mobile		Ser	vices															
	ACCESS LINES			TRUNK LINES				HIGH-CAPACITY TRUNK LINES														
5a.	Total Number of Access Lines Served		5b.	Total Number of Trunk Lines	Served			5c. Total Number of High-Capacity Trunk Lines Served														
6a.	Exempt Access Lines		6b.	Exempt Trunk Lines		_			6c.	E	empt	t Hig	h-Cap	acity	Trunk	Line	s T					
7a.	Total Number of Taxable Access Lines		7b.	Total Number of Taxable Trur	nk Lines				7c.	To	tal N	umb	er of T	Taxab	le Hig	h-Ca	apacity	Trunk	Lines	;		
	(Subtract 6a from 5a)			(Subtract 6b from 5b)						(S	ubtra	ct 6c	c from	5c)								
8a.	Gross Tax (Multiply 7a by \$3.80)		8b.	Gross Tax (Multiply 7b by \$28	8.58)				8c.	G	oss 1	Tax (Multip	ly 7c	by \$5 [.]	14.49	9)					
\$			\$						\$													
9.	Total Gross Tax for Other Than Prepaid Mobile Telephony Services (Add 8a, 8b and 8c) \$,			,				,						
10A.																						
	-			·	\$			<u>ן</u>														
10B. Number of Accounts Exceeding \$76,240.89 Cap \$ 11. Access Line Tax Due for Other Than Prepaid Mobile Telephony Services (Line 9 minus)							1	' <u> </u>			,				,	\vdash		\vdash	•			
10A) \$,				,								
12.	Total Access Line Tax Due (Line 4 plus Line 11)								,			,				,						
		-	,		\$																	
13. Late Filing Penalty: Add \$100.00 if delinquent \$ 14. Late Payment Penalty: If delinquent, multiply Line 12 by 5% per month up to 25%.								'			,				,				•			
\$							Ι.															
15								1	·			,				,						1
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16. 17	16. Administrative Fee: If filed or paid after: add \$55.00 \$ 17. Total Payment Due: Add line 12 through line 16. Make check payable to the SF Tax								-			,				,	\vdash		\vdash	·		
	Collector	unough ine n	0. Iviar	te check payable to the OF Ta	\$,				,						
	fy under penalty of perjury that I an																					
authority to bind the operator), or an agent of the operator authorized to sign this form on behalf of the operator pursuant to a validly executed Power of Attorney, and I have																						
examined the foregoing Access Line Tax Statement including any accompanying schedules or worksheets, and the information thereon is, to the best of my knowledge and belief, true and correct, and fully compliant with all the requirements provided in Articles 6 and 10B of the San Francisco Business and Tax Regulations Code and Part 21.1																						
(commencing with Section 42100) of the California Revenue and Taxation Code. I acknowledge that I am providing information in response to a request for financial																						
information pursuant to Section 6.5-1 of the San Francisco Business and Tax Regulations Code. I am required by law to complete this form in its entirety and understand this statement is subject to audit.																						
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SIGN	HERE X			[DATE																	
PRINT NAME				BUSINESS TELEPHONE																		
TITLE				E	E-MAIL																	