ST-810.4

(8/88)

New York State
Department of
TAXATION
and FINANCE

Quarterly Schedule NJ For Part-Quarterly Filers

NJ

For use by vendors located in New York State only.

Use this form to report only transactions for the period 0389 June 1, 1988 — August 31, 1988

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Use labeled form.	Read the instructions, ST-810.4	-I, carefully before completing this sched	ule.										
				If you have checked									
				the final return box on your New Jersey Sales Tax Return, check here also . Attach your New York State									
											Certificate of Authority.		
							Gross sales and services (from Form ST-810, page 1, box A)				\$		
		any New Jersey tax due for this period.	-	ou Yes									
		te any purchases subject to use tax in Ne s schedule and attach it to Form ST-810.	€W	No \square									
Summary of N	ew Jersey Taxes Due												
1. New Jersey	gross sales		1	\$									
	- -												
	·	om line 1)											
					.06								
4. New Jersey sales tax rate			4										
5. New Jersey sales tax computed (multiply line 3 by line 4)			5										
6. New Jersey sales tax collected			6										
7. New Jersey sales tax (amount from line 5 or line 6, whichever is larger)			7										
8. New Jersey use tax due (see instructions)													
9. Total New Jersey tax due (add line 7 and line 8)			9										
10. Monthly payr	ments (ST-809.4)												
	First Month +	Second Month	10										
11. Net New Jersey tax due (subtract line 10 from line 9)(if an overpayment see instructions).			11										
12. New Jersey late filing charge (see instructions)			12										
	rsey amount due (add line 11 a		13										
or money order	to include both this amount and the a	mount shown on Form ST-810, line 5.)		For office use only									
Attach this schedule to Form ST-810, <i>New York State and Local Sales and Use Tax Return</i> . Follow instructions for Form ST-810 for due date and mailing address.				•									
I swear, verify and/or affirm that all tax information on this statement is correct. I am aware that if any of the foregoing information provided by me is willfully false, I am subject to punishment.				applied N.Y. \$ 0, line 5 \$									
Signature		Title											
Telephone number (include	de area code)	Date											



NOTICE TO MONTHLY NEW JERSEY FILERS

There is an error on Form ST-810.4 for the period June 1, 1988 - August 31, 1988. The statement to the right of the address box on the top of this schedule should read that when you check the final return box on your **New York** Sales Tax return, you should attach your **New Jersey** Certificate of Authority.