



**PRINCE GEORGE'S COUNTY GOVERNMENT**

Office of Finance, Treasury Division  
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**CB-018-2025 TELECOMMUNICATIONS TAX**

**MONTHLY REMITTANCE RETURN**

(Due 15<sup>th</sup> day of each month)

**PRINT OR TYPE:**

Vendor Name: \_\_\_\_\_  
TIN#: \_\_\_\_\_ E-mail: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Use Whole Numbers**

1. Number of Telephone Lines for month and year: \_\_\_\_\_.

- a. Resident, Business or PBX local exchange access line or trunk
- b. Wireless Telephone Lines
- c. Centrex Local exchange access line or trunk line
- d. One-Time prepaid wireless line service
- e. (Number of Phone Lines Exempt) < >
- f. (Number of Phone Lines Exclusions) < >

Total Taxable Phone Lines:

2. Calculate Excise Tax (Multiply Total Taxable Phone Lines by 3.50):

3. Administrative fee to be retained by vendor (Multiply Excise Tax by 0.005):

Total Due (Line 2 minus Line 3):

4. Delinquent Payments

- a. Estimated interest due for late remittance @ 1% per month or fraction of a month:
- b. Estimated penalty due for late remittance @ 5% per month or fraction of a month up to 25%:

Total Delinquent Payments:

5. Credit for overpayment of month and year \_\_\_\_\_:

6. **NET AMOUNT DUE** (Add Total Due and Total Delinquent Payments, subtract Credit):

\$ \_\_\_\_\_

*I DECLARE UNDER PENALTY OF PERJURY THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN.*

Name: \_\_\_\_\_  
Print/Type \_\_\_\_\_ Title \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date \_\_\_\_\_