

*Delaware*  
*Division of Revenue*

**GROSS RECEIPTS**  
**TAX RETURN**  
Form LQ8 0601

DF53114019999



Business Name and Address \_\_\_\_\_

Account Number \_\_\_\_\_

Revenue Code \_\_\_\_\_

Business Code \_\_\_\_\_

Tax Period Ending \_\_\_\_\_

Due on or Before \_\_\_\_\_

1. RENTS OTHER THAN MOTOR VEHICLES

TAX RATE \_\_\_\_\_

2. RENTS FROM MOTOR VEHICLES

TAX RATE \_\_\_\_\_

3. AMOUNT DUE \_\_\_\_\_

NOT OFFICIAL - DO NOT FILE

I declare under penalties of perjury, that this is a true, correct and complete return.

Mail this Form with Remittance Payable to:

Delaware Division of Revenue  
P.O. Box 2340  
Wilmington DE 19899-2340

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number

For Questions Call: (302) 577-8780

\_\_\_\_\_  
Email Address