

**MANCHESTER TOWNSHIP  
MERCANTILE RETURN  
FOR THE YEAR 2025**

Name of Business .....

Business Location .....

Mailing Address .....

Nature of Business .....

Contact Name/ Phone Number.....

Make checks payable to:  
**JEAN STAMBAUGH**  
Tax Collector  
3204 Farmtrail Rd, York, PA 17406  
Telephone (717) 767-6689

Do you currently or did you in the past calendar year engage in any WHOLESALE BUSINESS operations?  
 Yes     No    If you checked the block marked "Yes," you must complete the appropriate subpart of PART I.

**PART I – WHOLESALE BUSINESS OPERATIONS**

- A. Full Year Operation** (from January 1, 2024 to December 31, 2024)  
The GROSS VOLUME OF WHOLESALE BUSINESS, cash or credit transacted was \$.....
- B. Part Year Operation** (commenced after January 1, 2024 but before December 1, 2024)  
**Annualized** GROSS VOLUME OF WHOLESALE BUSINESS, cash or credit transacted was \$.....
- C. New Operation** (commenced after December 1, 2024) The start date was .....  
The GROSS VOLUME OF WHOLESALE BUSINESS, cash or credit, for the first month of operation was \$ ..... multiplied by ..... (the number of months in 2025, including fractions thereof, from starting date to December 31, 2025) \$ .....

**Multiply** the dollar amount computed in A, B or C by .001 (1 mil). This is the amount you owe for your WHOLESALE BUSINESS OPERATIONS \$ .....

Do you currently or did you in the past calendar year engage in any RETAIL BUSINESS operations?  
 Yes     No    If you checked the block marked "Yes," you must complete the appropriate subpart of PART II.

**PART II – RETAIL BUSINESS OPERATIONS**

- A. Full Year Operation** (from January 1, 2024 to December 31, 2024)  
The GROSS VOLUME OF RETAIL BUSINESS, cash or credit transacted was \$.....
- B. Part Year Operation** (commenced after January 1, 2024 but before December 1, 2024)  
**Annualized** GROSS VOLUME OF RETAIL BUSINESS, cash or credit transacted was \$.....
- C. New Operation** (commenced after December 1, 2024) The start date was .....  
The GROSS VOLUME of RETAIL BUSINESS, cash or credit, for the first month of Operation was \$ ..... multiplied by ..... (the number of months in 2025, including fractions thereof, from starting date to December 31, 2025) \$ .....

**Multiply** the dollar amount computed in A, B or C by .0015 (1.5 mil). This is the amount you owe for your RETAIL BUSINESS OPERATIONS \$ .....

**Total Tax Due** (add Parts I and II above) \$ .....

**Penalty @ 10%** if paid after April 15, 2025 \$ .....

**TOTAL AMOUNT DUE** \$ .....

**Taxpayer:** I certify that this return has been examined by me and to the best of my knowledge and belief is a true, correct and complete return and in accordance with Manchester Township Code of Ordinances Chapter 24, Sections 201-212.

.....  
**Taxpayer Signature** **Date**

**IMPORTANT** – Every Taxpayer is required to attach a copy of IRS Schedule "C", Form 1065 or 1120 with return.  
INDICATE WHERE RECORDS WILL BE AVAILABLE FOR AUDIT OF THIS RETURN

**Please retain a copy of the return for your records.**