

Exhibit D3

Arkansas Excise Tax Return
ET-1 Form

TEST ACCOUNT
123 MAIN STREET
TEST CITY AR 77777-7777

ACCOUNT ID: 12345678-SLS

PERIOD ENDING: January 31, 2016

DUE ON OR BEFORE: February 22, 2016

Amended Return Check box and attach a detailed explanation and supporting documentation for amending the return.

Use whole dollars only. Use blue or black ink only.

Table with 6 columns: Gross Receipts Tax, A. Taxable Sales, B. Rate, C. Gross Tax Due, D. 2% Discount, E. Tourism Credit, F. Net Tax Due. Includes rows for State Tax, Food Tax, Mfg. Utility Tax, and Aviation Tax.

Table with 3 columns: Vendor Use Tax, A. Taxable Sales, B. Rate, C. Net Tax Due. Includes rows for State Tax, Food Tax, Mfg. Utility Tax, and Aviation Tax.

Table with 5 columns: Consumer Use Tax, A. Taxable Purchases, B. Rate, C. Gross Tax Due, D. Economic Dev Credit, E. Net Tax Due. Includes rows for State Tax, Food Tax, Mfg. Utility Tax, Aviation Tax, and 5.5% Mfg Repair.

DECLARE THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES) HAS BEEN EXAMINED BY ME, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND COMPLETE.
SIGN HERE
PRINT HERE
33. Total State Tax
34. Total Special & Alcoholic Beverage Taxes
35. Total Local Tax
36. Total Tax Due
37. Less Prepayments
38. Net Tax Due

Do Not Remove Voucher.



Department of Finance & Administration
Payment Voucher

Make your check payable to "Department of Finance & Administration". Write your Account ID on the check. Please mail return and voucher with payment to the address below:

DEPARTMENT OF FINANCE & ADMINISTRATION
P.O. BOX 3861
LITTLE ROCK, AR 72203-3861

Taxpayer Name: TEST ACCOUNT

Account ID: 12345678-SLS
Period Ending: January 31, 2016

Amount Paid:

\$

