Wisconsin Police and
Fire Protection Fee Worksheet

Wisconsin Tax Account Number		SSN or FEIN
Company Name		Period Begin Date
Company Address		Period End Date
City	State Zip	Due Date

DO NOT MAIL

PART I   Monthly Fees on Communications Service Connections

A **First 10 communications service connections with an assigned telephone number for each subscriber** (including Voice over Internet Protocol connections). Calculate the total fee due that applies to each of the first 10 connections or lines of a service user's account. If a proration was used to collect for partial months, include the prorated months in Line 1 (e.g., one-half month should be included as 0.5 on Line 1).

  1. Number of connections, including connections for partial months . . . . 1. _____

Rate . . . .   x $ 0.75

  2. Total . . . . 2. _____

B **Additional communications service connections for each subscriber.** Calculate the total fee due for each connection on line(s) in excess of 10 on each subscriber's account. The applicable fee for each connection or line after the first 10 is 1/10 of the per line fee used in Section A ($0.75 x 1/10 x $0.075). If a proration was used to collect for partial months, include the prorated months in Line 1 (e.g., one-half month should be included as 0.5 on Line 3).

  3. Number of additional connections, including connections for partial months (exclude those reported in Section A) . . . . 3. _____

Rate . . . .   x $ 0.075

  4. Total . . . . 4. _____

  5. Total police and fire protection fees for assigned telephone numbers (*Add Line 2 and Line 4*) . . . . 5. _____

PART II   Fees For Prepaid Transactions

A **Fees for prepaid transactions.** Calculate the total fee due that applies to each retail transaction for a prepaid wireless telecommunications plan.

  6. Number of transactions . . . . 6. _____

  7. Refunds and credits: Enter the number of transactions for which the fee was refunded to the purchaser and were previously reported on a prior return or this return . . . . 7. _____

  8. Subtotal *(Subtract Line 7 from Line 6)* . . . . 8. _____

Rate . . . .   x $ 0.38

  9. Total . . . . 9. _____

PART III   Total Due

  10. Add Line 5 and Line 9 . . . . 10. _____

  11. Enter uncollectible amounts and other deductions. See #15 of the Police and Fire Protection FAQ to determine what amounts may be deducted . . . . 11. _____

  12. Total Due or Refund *(Subtract Line 11 from Line 10)* . . . . 12. _____

Your return must be filed through *My Tax Account* by the last day of the month following the end of the reporting period. For more information, go to https://www.revenue.wi.gov/Pages/HTML/pfprofee.aspx.

Avoid duplicate filing. Do not mail in this worksheet.

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