

**STATE OF WEST VIRGINIA**  
**State Tax Department, Tax Account Administration Div**  
**P.O. Box 773**  
**Charleston, WV 25323-0773**



Earl Ray Tomblin, Governor

Craig A. Griffith, Tax Commissioner

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Address

Account #: \_\_\_\_\_

\_\_\_\_\_  
 City State Zip

**MONTHLY ESTIMATE OF SEVERANCE AND BUSINESS PRIVILEGE TAXES**  
**FOR PROVIDERS OF HEALTH CARE ITEMS AND SERVICES**

WV/SEV-400H  
 rL086 v.4 - Web

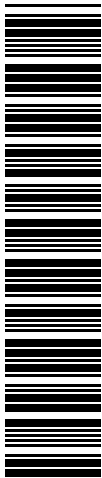
Save the stamp and your time. You can now view, file and pay this tax at <https://mytaxes.wvtax.gov>  
 More taxes will be available for online access in the future.

MAIL TO: WEST VIRGINIA STATE TAX DEPARTMENT  
 Tax Account Administration Div  
 P.O. Box 773, Charleston, WV 25323-0773  
 FOR ASSISTANCE CALL (304) 558-3333 TOLL FREE (800) 982-8297  
 For more information visit our web site at: [www.wvtax.gov](http://www.wvtax.gov)  
 File online at <https://mytaxes.wvtax.gov>

PLEASE CUT HERE. USE BLUE OR BLACK INK TO COMPLETE VOUCHER. DO NOT WRITE IN BARCODE AREA.

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**MONTHLY ESTIMATE OF SEVERANCE AND BUSINESS PRIVILEGE TAXES**  
**FOR PROVIDERS OF HEALTH CARE ITEMS AND SERVICES**



Account ID #	Period Ending:	Due Date:
1. Taxable Amount		.
2. Rate		0.05
3. Total Amount of Tax Due (Multiply Line 1 by Line 2)		.
4. \$41.67 Per Month Annual Exemption		.
5. Credit for Overpayment from Prior Year Annual Return		.
6. Total Tax Due (Line 3 minus Lines 4 and 5)		.

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 City State Zip

\_\_\_\_\_  
 SIGNATURE

\_\_\_\_\_  
 DATE