

# Virginia Department of Taxation

## Substitute Forms Specifications

### ST7V–Business Consumer’s Use Tax Payment Voucher

*Attention: All ST7 payments and vouchers / returns must be made electronically.  
Paper vouchers are only allowed for customers with an approved waiver.*

#### Special Notes

- Document ID – 137
- Barcode – No
- Rounding – No; the length of 15 for numeric fields includes the 2 places for the cents.
- Due Date – 20<sup>th</sup> of the month following end of period
- Neither the OCR Line nor the Account Number field may contain dashes or hyphens (-).
- Review the instructions provided via the [main Forms page](#) when computations are required and/or when amount/numbers must be transferred to/from another form.

Use the [Check Digit Calculator](#) to determine the correct digit used in the applicable section of the OCR Line.

#### OCR Table

Example – 14XXXXXXXXX1###D 137VVVV 1YYMMD

| Section                          | Length | Position       | Format / Data | Description / Details  |
|----------------------------------|--------|----------------|---------------|--|
| Tax Code                         | 2      | Col. 6, Row 52 | Numeric       | 14   |
| FEIN                             | 9      |                | Numeric       | XXXXXXXXX = 9 digits or V with 8 digits                                    |
| External ID Type                 | 1      |                | Numeric       | 1 = indicates the 9 digits before it as the FEIN                           |
| Account Suffix                   | 3      |                | Numeric       | ### = 3-digit Account Suffix, Ex. 001, 002, 003                            |
| Check Digit (for Account Number) | 1      |                | Numeric       | D = Check Digit Calculator result  |
| Blank Space                      | 1      |                | N/A           |  |
| Doc ID                           | 3      |                | Numeric       | 137  |
| Vendor ID                        | 4      |                | Numeric       | VVVV = 4 digits of the NACTP Vendor ID code                                |
| Blank Space                      | 1      |                | N/A           |  |
| Filing Period                    | 5      |                | Date (1YYMM)  | Ending date of the Filing Period<br>1 = Century, YY = Tax Year, MM = Month |
| Check Digit (for Filing Period)  | 1      |                | Numeric       | D = Check Digit Calculator   |

#### Form Table

| Field                     | Length | Justified / Position     | Format       | Negative Allowed? | Description / Details  |
|---------------------------|--------|--------------------------|--------------|-------------------|--|
| OCR Line                  | 31     | Col. 6, Row 52           | Numeric      | N/A               | See OCR Table for details  |
| Period                    | 7      | Left                     | Date         | N/A               | MM/YYYY  |
| Due Date                  | 10     | Left                     | Date         | N/A               | MM/DD/YYYY   |
| Account Number            | 15     | Left                     | Alphanumeric | N/A               | 14XXXXXXXXXXF###<br>14 = Tax Code, XXXXXXXXXXXX = FEIN,<br>F### = ID Type & Account Suffix |
| Name                      | 40     | Left                     | Alphanumeric | N/A               | Name of customer   |
| Address (Number & Street) | 40     | Left                     | Alphanumeric | N/A               | Street address of customer   |
| City, State & ZIP Code    | 52     | Left                     | Alphanumeric | N/A               | City, State Abbreviation & ZIP Code of customer  |
| Total Amount Due          | 15     | Right<br>Col. 60, Row 60 | Numeric      | No                | Amount   |