

Submit return and payment to:
Maggie Ragon
Commissioner of the Revenue
P.O. Box 4
Staunton, VA 24402

MEALS TAX RETURN
CITY OF STAUNTON, VA
COMMISSIONER OF THE REVENUE
(540) 332-3829
revenue@ci.staunton.va.us

Make check payable to:
City of Staunton, Treasurer

To avoid penalty and/or interest, this return with payment must be filed on or before the 20th day of the month following the tax month.

Tax Year:		Tax Month:	
Trade Name:			
Corporate Name:			
Mailing Address:			
City:		State:	Zip:

1. MONTHLY GROSS RECEIPTS FROM SALES OF MEALS/BEVERAGES SUBJECT TO THIS TAX	\$
2. ALLOWABLE DEDUCTIONS	
a. MEALS TO EMPLOYEES WHEN NO CHARGE IS MADE	\$
b. MEALS PAID FOR BY FEDERAL, STATE, OR LOCAL GOV'T	\$
c. OTHER (PLEASE PROVIDE EXPLANATION)	\$
3. TOTAL DEDUCTIONS (SUM OF 2A, 2B, 2C)	\$
4. NET GROSS RECEIPTS (LINE 1 - LINE 3)	\$
5. TAX (LINE 4 x 7%)	\$
6. SELLERS DISCOUNT** (LINE 5 x 3%) ☐ CHECK BOX IF SELLERS DISCOUNT APPLIES	\$
**Sellers Discount only applies if return is filed and paid on or before the due date.	
7. TOTAL TAX DUE (LINE 5 - LINE 6)	\$
8. PENALTY FOR LATE PAYMENT (LINE 7 x 5%)	\$
9. INTEREST (10% PER ANNUM)	\$
10. TOTAL TAX DUE INCLUDING PENALTY & INTEREST (SUM OF LINES 7, 8, & 9)	\$

By signing this return, I, hereby, declare that this return has been examined by me and is true, complete, and correct to the best of my knowledge and belief.

Signature

Date

FOR OFFICE USE ONLY Date: _____ Amt. Rec.: \$ _____ Check # _____ ☐ Paid at Treasurer